

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

ADDRESS (number and street)

320 FIRST STREET SE

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00075820

3. IS THIS
REPORTNEW
(N)**OR**AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2011

through

04

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Keith A. Davis

Signature of Treasurer

Electronically Filed by Keith A. Davis

Date

05

20

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

All payments reported on Line 21b are operating and administrative payments solely benefiting and on behalf of the National Republican Congressional Committee. As such, they are not made on behalf of any specifically identified federal candidates, nor do they constitute public communications or voter drive activity containing express advocacy. Therefore, these disbursements are correctly reported on Schedule B for Line 21b, and do not require a Schedule B, Schedule E, or Schedule F for lines 23, 24 or 25. The Committee has reviewed all reimbursements to individuals for travel and subsistence and confirms that no further itemization is required under any Commission regulations for these expenditures.

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Report Covering the Period:

From:

M M
0 4D D
0 1Y Y Y Y
2 0 1 1

To:

M M
0 4D D
3 0Y Y Y Y
2 0 1 1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2011		2538301.71
(b) Cash on Hand at Beginning of Reporting Period	9035784.18	
(c) Total Receipts (from Line 19)	4066749.56	22171155.26
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	13102533.74	24709456.97
7. Total Disbursements (from Line 31)	3500576.44	15107499.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9601957.30	9601957.30
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	7500000.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	4	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	W	Y
0	4	3	0	2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	1430465.63	8095657.02
(ii) Unitemized	1464643.24	6708956.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2895108.87	14804613.97
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	900735.94	5492835.94
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3795844.81	20297449.91
12. Transfers From Affiliated/Other Party Committees	240104.75	1514491.86
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	265563.49
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	30800.00	93650.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	4066749.56	22171155.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4066749.56	22171155.26

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	2984768.91	11844107.69	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	2984768.91	11844107.69	
22. Transfers to Affiliated/Other Party Committees.....	0.00	3600.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	2740.95	
26. Loan Repayments Made.....	500000.00	3000000.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	2320.00	32810.59	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	5000.00	20000.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	7320.00	52810.59	
29. Other Disbursements.....	8487.53	204240.44	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3500576.44	15107499.67	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3500576.44	15107499.67	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	3795844.81	20297449.91
34. Total Contribution Refunds (from Line 28(d))	7320.00	52810.59
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3788524.81	20244639.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2984768.91	11844107.69
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	265563.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2984768.91	11578544.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. ABBOTT

Mailing Address 91-1026 HOOMALIE ST

City

EWA BEACH

State

HI

Zip Code

96706-4924

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEPT OF THE NAVY

Occupation

FEDERAL EMPLOYEE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207355

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN R. ADAIR

Mailing Address 2016 TIMBERVIEW DR.

City

EDMOND

State

OK

Zip Code

73013-2736

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184066

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN R. ADAIR

Mailing Address 2016 TIMBERVIEW DR.

City

EDMOND

State

OK

Zip Code

73013-2736

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200159

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN R. ADAIR

Mailing Address 2016 TIMBERVIEW DR.

City

EDMOND

State

OK

Zip Code

73013-2736

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202495

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LESTER D. ADAMS

Mailing Address 4915 33RD AVE CT E

City

TACOMA

State

WA

Zip Code

98443-1580

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206533

Amount of Each Receipt this Period

70.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LEX W. ADAMS

Mailing Address P.O. BOX 19696

City

RENO

State

NV

Zip Code

89511-2404

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190240

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MARILYN ADAMS

Mailing Address 9855 BRIARWILD LN.

City

HOUSTON

State

TX

Zip Code

77080-7601

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEURODEVELOP MENTAL

Occupation

SPEECH LANGUAGE PATHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14215106

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. ARTHUR S. AGATSTON

Mailing Address 1633 NORTH VIEW DRIVE

City

MIAMI BEACH

State

FL

Zip Code

33140-4251

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHEAST PREVENTATIVE CA-
RDIOLOGY

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202364

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARLENE AIELLO

Mailing Address 212 KEY PALM ROAD

City

BOCA RATON

State

FL

Zip Code

33432-7924

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202377

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. PATRICIA A. AINLEY

Mailing Address 6020 MELVIN AVE

City

TARZANA

State

CA

Zip Code

91356-1024

FEC ID number of contributing
federal political committee.

C

Name of Employer
A & M MANAGEMENT LLC

Occupation

REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14207624

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LEE S. AINSIE, III

Mailing Address 300 CRESCENT COURT
18TH FLOOR

City

DALLAS

State

TX

Zip Code

75201-1876

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAVERICK CAPITAL

Occupation

INVESTMENTS ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14216151

Amount of Each Receipt this Period

30800.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOSEPH AKERMAN

Mailing Address 418 ALBION AVE

City

WOODSIDE

State

CA

Zip Code

94062-3604

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14210956

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

31250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RICHARD D. ALANIZ

Mailing Address 2500 CITYWEST BLVD. STE. 1000

City

HOUSTON

State

TX

Zip Code

77042-3034

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14217509

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM J. ALBRECHT

Mailing Address 11268 HERTZ CT.

City

UNION

State

KY

Zip Code

41091-8008

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190334

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DOLA B. ALBUSCHE

Mailing Address 6021 GOLDEN CENTER CT APT 207

City

PLACERVILLE

State

CA

Zip Code

95667-6220

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14175557

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. LEONARD B. ALENICK

Mailing Address 5920 100TH ST SW
33

City State Zip Code
LAKEWOOD WA 98499-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191402

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

CDR ALEXANDER

Mailing Address 3262 TIGERTAIL DRIVE

City State Zip Code
LOS ALAMITOS CA 90720-4836

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175488

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DON G. ALEXANDER

Mailing Address 2824 GREENACRE DR.

City State Zip Code
FINDLAY OH 45840-4157

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14187912

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DON G. ALEXANDER

Mailing Address 2824 GREENACRE DR.

City

FINDLAY

State

OH

Zip Code

45840-4157

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223328

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MILDRED ALLAIRE

Mailing Address 224 CHATHAM K

City

WEST PALM BEACH

State

FL

Zip Code

33417-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14178078

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

TERRY M. ALLARD

Mailing Address 91-179 MAKALEA ST.

City

EWA BEACH

State

HI

Zip Code

96706-5904

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194443

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH ALLEN

Mailing Address 9218 CHISHOLM TRL

City

TYLER

State

TX

Zip Code

75703-0406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14179987

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EUGENE H. ALLEN

Mailing Address P.O. BOX 132

City

OAK RIDGE

State

LA

Zip Code

71264-0132

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF OAK RIDGEOccupation
BANK MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190856

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES ALLEN

Mailing Address 3560 NW 99TH AVE

City

CORAL SPRINGS

State

FL

Zip Code

33065-2832

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14211771

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

735.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 15 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS J. ALT

Mailing Address 278 HICKORY ST

City

SPARTA

State

MI

Zip Code

49345-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPARTA FRUIT STORAGE INC.

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187298

Amount of Each Receipt this Period

70.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SUSAN ALTAMORE CARUSI

Mailing Address P.O. BOX 203

City

MILL NECK

State

NY

Zip Code

11765-0203

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213856

Amount of Each Receipt this Period

25000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

SCHLECH ALYCE

Mailing Address 611 NE ALSBURY BLVD. APT 504

City

BURLESON

State

TX

Zip Code

76028-2697

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188503

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

26070.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN O. AMBLER

Mailing Address 317 COVERED BRIDGE DRIVE

City

FORT WORTH

State

TX

Zip Code

76108-9608

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF

Occupation
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197670

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TED E. AMSBAUGH

Mailing Address 1302 24TH ST W 329

City

BILLINGS

State

MT

Zip Code

59102-3861

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188864

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TED E. AMSBAUGH

Mailing Address 1302 24TH ST W 329

City

BILLINGS

State

MT

Zip Code

59102-3861

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14200953

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. TED E. AMSBAUGH

Mailing Address 1302 24TH ST W 329

City

BILLINGS

State

MT

Zip Code

59102-3861

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.1422582

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. C. ANAGNOSTOPOULOS

Mailing Address 33 PEPPERMILL RD.

City

ROSLYN

State

NY

Zip Code

11576-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190243

Amount of Each Receipt this Period

240.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CYNTHIA ANDERSON

Mailing Address P.O. BOX 38

City

OLD TOWN

State

FL

Zip Code

32680-0038

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205330

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

590.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE ELI ANDERSON

Mailing Address 11412 MISSISSIPPI DRIVE

City

CHAMPLIN

State

MN

Zip Code

55316-3508

FEC ID number of contributing
federal political committee.

C

Name of Employer
CROWN HOLDINGS

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14231508

Amount of Each Receipt this Period

24000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. NANCY M. ANDERSON

Mailing Address 3045 BUENA VIDA CIR APT 319

City

LAS CRUCES

State

NM

Zip Code

88011-9125

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14200952

Amount of Each Receipt this Period

410.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

S. J. ANDERSON

Mailing Address 1 MONTEREY TER.

City

ORINDA

State

CA

Zip Code

94563-3130

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203703

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

24610.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ERNEST ANGELO, JR.

Mailing Address 410 NORTH MAIN

City

MIDLAND

State

TX

Zip Code

79701-4710

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PETROLEUM ENGINEER

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210485

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. CRISTINA ARDILA

Mailing Address 1904 JOE STEPHENS AVE

City

WESLACO

State

TX

Zip Code

78596-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205069

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LOIS M. ARENDS

Mailing Address 334 KAUFMAN DR

City

LODA

State

IL

Zip Code

60948-9745

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198606

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

AMB. GEORGE L. ARGYROS

Mailing Address 949 SOUTH COAST DRIVE
STE. 600

City State Zip Code
COSTA MESA CA 92626-7734

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARNEL AND AFFILIATES

Occupation
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14216149

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GARY ARNOLD

Mailing Address 5133 1ST ST N

City State Zip Code
ARLINGTON VA 22203-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FREELANCE WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192199

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAKE F. ARONOV

Mailing Address PO BOX 235000

City State Zip Code
MONTGOMERY AL 36123-5000

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198323

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES ARTHAUD

Mailing Address PO BOX 458

City

BELFIELD

State

ND

Zip Code

58622-0458

FEC ID number of contributing
federal political committee.

C

Name of Employer
MISSOURI BASIN WELL SYSTEM

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211776

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MISS MARY E. ARTHUR

Mailing Address 459 PENINSULA DR.

City

HOT SPRINGS

State

AR

Zip Code

71901-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206530

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. D. W. ASHBY, JR.

Mailing Address PO BOX 1928
APT. 2506

City

PINEHURST

State

NC

Zip Code

28370

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213728

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DWAN ASHBY

Mailing Address P.O. BOX 1928

City

PINEHURST

State

NC

Zip Code

28370-1928

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210963

Amount of Each Receipt this Period

320.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNY ASHBY

Mailing Address 1 NORTHRIDGE WAY

City

SANDY

State

UT

Zip Code

84092-4906

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194629

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MYRA J. ASPLUNDH

Mailing Address P.O. BOX 11

City

BRYN ATHYN

State

PA

Zip Code

19009-0011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184969

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1070.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE ATANASOSKI

Mailing Address 605 OCEAN SHORE BLVD.

City

ORMOND BEACH

State

FL

Zip Code

32176-4701

FEC ID number of contributing
federal political committee.

C

Name of Employer
MICOFLEX INC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196263

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. ANNE J. ATKINSON

Mailing Address 214 S ADAMS ST

City

PETERSBURG

State

VA

Zip Code

23803-4529

FEC ID number of contributing
federal political committee.

C

Name of Employer
POLICY WORKS LTD.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187271

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SHARON AVENT

Mailing Address 12930 LOCK BLVD

City

HASTINGS

State

MN

Zip Code

55033-8653

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMEAD

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177993

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1020.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH A. BADIA

Mailing Address 1400 NW 93 AVENUE

City

DORAL

State

FL

Zip Code

33172-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202367

Amount of Each Receipt this Period

20000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ADIL BAGUIROV

Mailing Address 3920 CHARLES AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22305-2059

FEC ID number of contributing
federal political committee.

C

Name of Employer
WSE, INC.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194230

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DOROTHY L. BAIRD

Mailing Address 2913 VIA CARRIO

City

CARLSBAD

State

CA

Zip Code

92010-8341

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179504

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

20600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 25 / 760

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MISS MARY H. BAIRD

Mailing Address 22236 WOODLAWN AVE

City

BROOKSVILLE

State

FL

Zip Code

34601-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14180490

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. BAIRD

Mailing Address 1621 JACKSBORO PIKE

City

LA FOLLETTE

State

TN

Zip Code

37766-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199242

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. BAIRD

Mailing Address 1621 JACKSBORO PIKE

City

LA FOLLETTE

State

TN

Zip Code

37766-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222200

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. BAIRD

Mailing Address 1621 JACKSBORO PIKE

City

LA FOLLETTE

State

TN

Zip Code

37766-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224099

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CAROL BAKER

Mailing Address 30573 E SUNSET DR. S

City

REDLANDS

State

CA

Zip Code

92373-7340

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200089

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. CAROL BAKER

Mailing Address 30573 E SUNSET DR. S

City

REDLANDS

State

CA

Zip Code

92373-7340

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222232

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHNNY BAKER

Mailing Address 9121 ELIZABETH ROAD, SUITE 101

City

HOUSTON

State

TX

Zip Code

77055-6407

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAKER MANAGERS LLC

Occupation

REAL ESTATE/INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194211

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

VIRGINIA BAKER

Mailing Address RR 5 BOX 410

City

BUTLER

State

MO

Zip Code

64730-9176

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194360

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM BALDERSTON, III

Mailing Address 28 WHITESTONE LN

City

ROCHESTER

State

NY

Zip Code

14618-4126

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180060

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DONALD E. BALDOVIN

Mailing Address 1108 LAVACA ST. STE. 110-122

City

AUSTIN

State

TX

Zip Code

78701-2172

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185122

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MARIE G. BALDWIN

Mailing Address 8523 THACKERY ST APT 2308

City

DALLAS

State

TX

Zip Code

75225-3910

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224199

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GARY BALL

Mailing Address 413 SADDLE TREE DR

City

NEW BRAUNFELS

State

TX

Zip Code

78130-5261

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202067

Amount of Each Receipt this Period

215.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

815.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. FRANK BALMA

Mailing Address 15995 GREENWOOD RD

City

MONTE SERENO

State

CA

Zip Code

95030-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224563

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANK BALMA

Mailing Address 15995 GREENWOOD RD

City

MONTE SERENO

State

CA

Zip Code

95030-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224733

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JOYCE M. BALZARANO

Mailing Address 104 HECKER AVE

City

DARIEN

State

CT

Zip Code

06820-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181128

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOYCE M. BALZARANO

Mailing Address 104 HECKER AVE

City

DARIEN

State

CT

Zip Code

06820-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182459

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JOYCE M. BALZARANO

Mailing Address 104 HECKER AVE

City

DARIEN

State

CT

Zip Code

06820-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212150

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JOYCE M. BALZARANO

Mailing Address 104 HECKER AVE

City

DARIEN

State

CT

Zip Code

06820-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212524

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOYCE M. BALZARANO

Mailing Address 104 HECKER AVE

City

DARIEN

State

CT

Zip Code

06820-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214564

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. DOLORES UFER BANTA

Mailing Address 111 MIDDLEBROOK FARM RD

City

WILTON

State

CT

Zip Code

06897-2019

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193073

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. H. RIGEL BARBER

Mailing Address 321 W. MENOMONEE STEET

City

CHICAGO

State

IL

Zip Code

60614-5341

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186876

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. LORETTA D. BARBEE

Mailing Address 1204 S. BORDER AVE.

City

WESLACO

State

TX

Zip Code

78596

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190754

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MICHAEL J. BARBER

Mailing Address 1172 CAVE SPRINGS TRL

City

LAS CRUCES

State

NM

Zip Code

88011-4004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14186203

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARY BARGER

Mailing Address 301 CHELSEA RD

City

MONTICELLO

State

MN

Zip Code

55362-8430

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUBURBAN MANUFACTURING IN-
C.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

OWNER

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175517

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DODSON R. BARINEAU

Mailing Address 726 LOVEVILLE RD
APT A45

City	State	Zip Code
HOCKESSIN	DE	19707-1538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	1

Transaction ID: SA11.14202100

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOSEPH A. BARKENBUSH

Mailing Address 4310 N CAMINO ARCO

City	State	Zip Code
TUCSON	AZ	85718-7017

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	1	1

Transaction ID: SA11.14221713

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN F. BARNA

Mailing Address 122 HEATHER COURT

City	State	Zip Code
PALM DESERT	CA	92260-6748

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	1

Transaction ID: SA11.14180065

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

605.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. CHRISTINE M. BARR

Mailing Address 1200 DALEVIEW DRIVE

City

MCLEAN

State

VA

Zip Code

22102-1539

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194215

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ALAN BARTELHEIMER

Mailing Address 78 REYNOLDS RD

City

OTHELLO

State

WA

Zip Code

99344-9039

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220046

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WILLIAM F. BARTOSH

Mailing Address 3144 EXECUTIVE DR.

City

SAN ANGELO

State

TX

Zip Code

76904-6802

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194349

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH L. BASRALIAN

Mailing Address 710 ONEIDA TRAIL

City

FRANKLIN LAKES

State

NJ

Zip Code

07417-2217

FEC ID number of contributing
federal political committee.

C

Name of Employer
WINNE, BANTA

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201260

Amount of Each Receipt this Period

220.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ED S. BATCHELDER

Mailing Address 9808 FIELDCREST DR

City

OMAHA

State

NE

Zip Code

68114-4935

FEC ID number of contributing
federal political committee.

C

Name of Employer
U S CHECK BOOK CO

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198072

Amount of Each Receipt this Period

220.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

TRAY BATES

Mailing Address 430 CAPE HATTERAS DRIVE

City

CORPUS CHRISTI

State

TX

Zip Code

78412-2666

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14221936

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

940.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 760

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS BAUMLER

Mailing Address 19856 E UNION DR

City

CENTENNIAL

State

CO

Zip Code

80015-3490

FEC ID number of contributing
federal political committee.

C

Name of Employer
FA SERVICES

Occupation

FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219840

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS JANICE M. BEAL

Mailing Address 14106 TIMBERLINE DR.

City

URBANDALE

State

IA

Zip Code

50323-1724

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217997

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARY S. BEAUFORD

Mailing Address 3402 S 252ND PACE

City

KENT

State

WA

Zip Code

98032-5666

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186644

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARY S. BEAUFORD

Mailing Address 3402 S 252ND PACE

City

KENT

State

WA

Zip Code

98032-5666

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205827

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARY S. BEAUFORD

Mailing Address 3402 S 252ND PACE

City

KENT

State

WA

Zip Code

98032-5666

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210480

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ANN M. BECK

Mailing Address 320 OLD OAKS LN.

City

GLASGOW

State

VA

Zip Code

24555-2299

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213347

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. BRENDA L. BECKER

Mailing Address 8214 MACK STREET

City

ALEXANDRIA

State

VA

Zip Code

22308-1653

FEC ID number of contributing
federal political committee.

C

Name of Employer
BOSTON SCIENTIFIC

Occupation

SENIOR V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14202382

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ART BECKWITH

Mailing Address PO BOX 1029

City

PROGRESO

State

TX

Zip Code

78579-1029

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202047

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD S. BEDGOOD

Mailing Address 127 SHELTERWOOD LN

City

DANVILLE

State

CA

Zip Code

94506-4763

FEC ID number of contributing
federal political committee.

C

Name of Employer
RECOLOGY SAN FRANCISCO

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185941

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2720.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. EVONNE B. BEDWELL

Mailing Address 2209 W ACRES RD

City

JOLIET

State

IL

Zip Code

60435-5507

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199102

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. BEER

Mailing Address 701 8TH STREET NW
SUITE 500

City

WASHINGTON

State

DC

Zip Code

20001-3965

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILLIAMS AND JENSEN

Occupation
PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180449

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARY J. BEHE

Mailing Address 92 LAKEWOOD VILLAGE

City

MEDINA

State

NY

Zip Code

14103-1846

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179266

Amount of Each Receipt this Period

175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MARY J. BEHE

Mailing Address 92 LAKEWOOD VILLAGE

City

MEDINA

State

NY

Zip Code

14103-1846

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217276

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JAMES R. BELLEFEUIL

Mailing Address 14965 ABBEY LN.

City

BATH

State

MI

Zip Code

48808-7709

FEC ID number of contributing
federal political committee.

C

Name of Employer
ASA

Occupation
PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203554

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FREDERIC N. BENNING

Mailing Address 18135 VINTAGE ST

City

NORTHRIDGE

State

CA

Zip Code

91325-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198042

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

EARL BENSON

Mailing Address 5066 TUCKER RIDGE

City

MACON

State

GA

Zip Code

31210-2955

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200101

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DEWARD BENTON

Mailing Address 903 MINUTEMEN CSWY

City

COCOA BEACH

State

FL

Zip Code

32931-2843

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179302

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DEWARD BENTON

Mailing Address 903 MINUTEMEN CSWY

City

COCOA BEACH

State

FL

Zip Code

32931-2843

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192182

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES F. BENZING

Mailing Address 7558 FAIRLINKS CT

City

SARASOTA

State

FL

Zip Code

34243-3830

FEC ID number of contributing
federal political committee.

C

Name of Employer
J&B WELDING

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185948

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

VIRGIL M. BERDINE

Mailing Address 5029 PACIFIC GROVE DR

City

LAS VEGAS

State

NV

Zip Code

89130-2012

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195520

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HENRY B. BERGEY

Mailing Address 462 HARLEYSVILLE PIKE

City

FRANCONIA

State

PA

Zip Code

18924-6000

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192806

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HENRY B. BERGEY

Mailing Address 462 HARLEYSVILLE PIKE

City

FRANCONIA

State

PA

Zip Code

18924-6000

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220289

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. ROBERT M. BERLEY

Mailing Address 130 KIRK LN

City

MEDIA

State

PA

Zip Code

19063-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHRISTIANA CARE INC.

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196875

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. ROBERT M. BERLEY

Mailing Address 130 KIRK LN

City

MEDIA

State

PA

Zip Code

19063-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHRISTIANA CARE INC.

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14215936

Amount of Each Receipt this Period

750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. LEROY K. BERRETT

Mailing Address P.O. BOX 1129

City

HANFORD

State

CA

Zip Code

93232-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer
J G PARKER & ASSOC

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196793

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALLEN D. BERRY, JR.

Mailing Address 2100 S BERRYS CHAPEL RD.

City

FRANKLIN

State

TN

Zip Code

37069-8302

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201101

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GERALD L. BERRY

Mailing Address 1630 TIVERTON STREET

City

WINTER SPRINGS

State

FL

Zip Code

32708-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer
COVENANT AVIATION SECURITY

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189700

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROLLAND E. BETHARDS

Mailing Address 2333 SAPPHIRE LN

City

EAST LANSING

State

MI

Zip Code

48823-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192218

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BILL E. BEYE

Mailing Address 2244 132ND AVE. SE APT. B118

City

BELLEVUE

State

WA

Zip Code

98005-5319

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARBY'S RESTAURANTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RESTAURANT OWNER

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204156

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ADOLPH L. BEYERLEIN

Mailing Address 307 LANCELOT DR.

City

CLEMSON

State

SC

Zip Code

29631-2130

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191706

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS P. BIGWOOD

Mailing Address 7498 IDA WAY

City

CANAL WNCSTR

State

OH

Zip Code

43110-1335

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190245

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. SHERNAZ BILLIMORIA

Mailing Address 1843 VIOLA LN

City

HELLERTOWN

State

PA

Zip Code

18055-2711

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188501

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CARL BIMEL

Mailing Address 393 ERIE AVENUE APT 4100

City

CINCINNATI

State

OH

Zip Code

45208

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188026

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ARTHUR W. BINE

Mailing Address 21075 310TH ST

City

BEAMAN

State

IA

Zip Code

50609-8535

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194902

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KEVIN BINGER

Mailing Address 12910 CREAMERY HILL DRIVE

City

GERMANTOWN

State

MD

Zip Code

20874-6338

FEC ID number of contributing
federal political committee.

C

Name of Employer
CASSIDY & ASSOCIATES

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180445

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ANTONIO M. BIRD, JR.

Mailing Address 24 MAPLEWOOD ROAD

City

ASHEVILLE

State

NC

Zip Code

28804-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194622

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. VIVIAN BIRDSALL

Mailing Address 8204 KENSINGTON SQ

City

JACKSONVILLE

State

FL

Zip Code

32217-4401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14183714

Amount of Each Receipt this Period

125.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MATTHEW R. BISSELL

Mailing Address 1264 LAUREL CT.

City

MARCO ISLAND

State

FL

Zip Code

34145-2352

FEC ID number of contributing
federal political committee.

C

Name of Employer
IMPERIAL CLINICAL RESEAR-
CH SERVICES

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14189979

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES V. BITNER

Mailing Address P.O. BOX 610

City

ROCKPORT

State

ME

Zip Code

04856-0610

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213758

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

875.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HOLLIS E. BIVENS

Mailing Address 2345 SAGE RD. APT. 245

City

HOUSTON

State

TX

Zip Code

77056-4664

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188133

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BEN F. BLACKMON

Mailing Address 120 CROSSPOINT APT 208

City

BOERNE

State

TX

Zip Code

78006-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188078

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BEN F. BLACKMON

Mailing Address 120 CROSSPOINT APT 208

City

BOERNE

State

TX

Zip Code

78006-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188127

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. M. T. BLACKMON

Mailing Address 170 AN COUNTY ROAD 145

City

PALESTINE

State

TX

Zip Code

75801-6326

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181433

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. M. T. BLACKMON

Mailing Address 170 AN COUNTY ROAD 145

City

PALESTINE

State

TX

Zip Code

75801-6326

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197135

Amount of Each Receipt this Period

15.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. M. T. BLACKMON

Mailing Address 170 AN COUNTY ROAD 145

City

PALESTINE

State

TX

Zip Code

75801-6326

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226076

Amount of Each Receipt this Period

15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RON BLALOCK

Mailing Address P.O. BOX 900

City

JONES

State

OK

Zip Code

73049-0900

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAMELOT FINANCIAL

Occupation

CONSUMER FINANCE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196455

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOSEPH R. BLANTERN

Mailing Address 2230 FOREST AVE

City

NIAGARA FALLS

State

NY

Zip Code

14301-1402

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14246654

Amount of Each Receipt this Period

-250.00

CONTRIBUTION

CHARGED BACK

C.

Full Name (Last, First, Middle Initial)

MS. MARGARET V. BLOSS

Mailing Address 415 CAMINO REAL AVE

City

EL PASO

State

TX

Zip Code

79922-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

HORSE BREEDER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14187059

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARGARET V. BLOSS

Mailing Address 415 CAMINO REAL AVE

City

EL PASO

State

TX

Zip Code

79922-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

HORSE BREEDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14215525

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARGARET V. BLOSS

Mailing Address 415 CAMINO REAL AVE

City

EL PASO

State

TX

Zip Code

79922-2003

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

HORSE BREEDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.14220891

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. BLOWERS

Mailing Address 512 N BUSH RD

City

JOHNSTOWN

State

NY

Zip Code

12095-3840

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW YORK STATE

Occupation

NEW YORK STATE CORRECTIONAL OF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14206709

Amount of Each Receipt this Period

175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City

MARSHALL

State

MO

Zip Code

65340-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179054

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City

MARSHALL

State

MO

Zip Code

65340-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195935

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City

MARSHALL

State

MO

Zip Code

65340-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203593

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. DOLORES A. BLUMHORST

Mailing Address 1404 REYNOLDS RD

City

MARSHALL

State

MO

Zip Code

65340-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217496

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

B.G. JAMES W. BODDIE, JR.

Mailing Address 4108 INDIAN TRL.

City

DESTIN

State

FL

Zip Code

32541-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196742

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GEORGE H. BODINE

Mailing Address 60 W. 57TH STREET
APT 6J

City

NEW YORK

State

NY

Zip Code

10019-3953

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189730

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. RUTH E. BODIN

Mailing Address 1801 GERVAIS AVE APT 108

City

SAINT PAUL

State

MN

Zip Code

55109-2147

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205536

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DAVID BOHREN

Mailing Address 7617 HURSH RD

City

LEO

State

IN

Zip Code

46765-9538

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207479

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BEVERLY W. BOLIN

Mailing Address 3201 MARTIN BLVD.

City

WICHITA FALLS

State

TX

Zip Code

76308-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199625

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MARCIA H. BOLING

Mailing Address 1221 GRAHAM DR
APT 225

City State Zip Code
TOMBALL TX 77375-6495

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193126

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. REBA S. BOLINGER

Mailing Address 1314 STILLWATER RD.

City State Zip Code
LANCASTER PA 17601-5328

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184992

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MARILYNN A. BONZER

Mailing Address 840 N RANCHO DR

City State Zip Code
LONG BEACH CA 90815-4736

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200802

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN W. BORCHERDT

Mailing Address 893 ULSTER LANDING RD.

City

SAUGERTIES

State

NY

Zip Code

12477-4535

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197137

Amount of Each Receipt this Period

85.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH E. BORCHERS

Mailing Address 1303 COMANCHE DR

City

RICHARDSON

State

TX

Zip Code

75080-3712

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221532

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. AL R. BORDELON

Mailing Address 3958 FAIRLINGTON DRIVE

City

UPPER ARLINGTON

State

OH

Zip Code

43220-4531

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190485

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT D. BOSIC

Mailing Address 3905 CHANNEL PL

City

NEWPORT BEACH

State

CA

Zip Code

92663-3231

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORINTHIAN COLLEGES

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194178

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL BOULER

Mailing Address 17575 HIGHWAY 465

City

VICKSBURG

State

MS

Zip Code

39183-7534

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180031

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KEVIN A. BOUSQUETTE

Mailing Address 70 MIDWOOD ROAD

City

GREENWICH

State

CT

Zip Code

06830-3840

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194157

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. BETSY B. BOWEN

Mailing Address 900 N LAKE SHORE DR APT 1007

City

CHICAGO

State

IL

Zip Code

60611-1591

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182779

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BRADFORD BOWMAN

Mailing Address 21600 OXNARD ST.
STE. 1150

City

WOODLAND HILLS

State

CA

Zip Code

91367-7840

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PRESIDENT

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180010

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. PATRICIA BOWMAN

Mailing Address 2137 CHESTNUT ST

City

HARRISBURG

State

PA

Zip Code

17104-1334

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213425

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID W. BOYER

Mailing Address 400 MADISON ST APT 907

City

ALEXANDRIA

State

VA

Zip Code

22314-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHRMA

Occupation

GOVERNMENT AFFAIRS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14194177

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SHELLEY BOYLE

Mailing Address 5180 TAPO CANYON RD
ROUTE 2

City

SIMI VALLEY

State

CA

Zip Code

93063

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14200982

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CORNELIUS BRADLEY

Mailing Address 25735 274TH ST

City

LA MOTTE

State

IA

Zip Code

52054-9587

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14206741

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. NANCY M. BRADLEY

Mailing Address 4424 NEW BROAD STREET

City

ORLANDO

State

FL

Zip Code

32814-6046

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194173

Amount of Each Receipt this Period

3500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MARTIN L. BRADSHAW

Mailing Address P.O. BOX 1901

City

HENDERSON

State

NC

Zip Code

27536-1901

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAROLINA GREENSCAPES INC

Occupation

LANDSCAPE CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184584

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LILITH M. BRAINARD

Mailing Address 2125 MARY ELLEN ST

City

PAMPA

State

TX

Zip Code

79065-3709

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

RANCHING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198584

Amount of Each Receipt this Period

600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JIM D. BRAKER

Mailing Address P.O. BOX 289

City

ROANOKE

State

IL

Zip Code

61561-0289

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFTS OF ILLINOIS INC

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190234

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. A. JOSEPH BRANDMEYER

Mailing Address 824 CHERRY HILL LANE

City

EL PASO

State

TX

Zip Code

79912-3325

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198351

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CHUCK BRANNON

Mailing Address 115 E 86TH ST #34

City

NEW YORK

State

NY

Zip Code

10028-1057

FEC ID number of contributing
federal political committee.

C

Name of Employer
PEM-AMERICA INC

Occupation
VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180336

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ETHEL P. BRANNOCK

Mailing Address 435 SW FAIRWAY LK

City

PORT SAINT LUCIE

State

FL

Zip Code

34986-2130

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178565

Amount of Each Receipt this Period

25.50

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ETHEL P. BRANNOCK

Mailing Address 435 SW FAIRWAY LK

City

PORT SAINT LUCIE

State

FL

Zip Code

34986-2130

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196870

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ETHEL P. BRANNOCK

Mailing Address 435 SW FAIRWAY LK

City

PORT SAINT LUCIE

State

FL

Zip Code

34986-2130

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219349

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

55.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DONNY F. BRANTLEY

Mailing Address 5303 LOGSTON LN

City
SPRING

State
TX

Zip Code
77389-4579

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAFETECH ENTERPRISES

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179952

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ANNE H. BRATCHER

Mailing Address 4942 NORMANDY LN.

City
MEMPHIS

State
TN

Zip Code
38117-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186811

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ANNE H. BRATCHER

Mailing Address 4942 NORMANDY LN.

City
MEMPHIS

State
TN

Zip Code
38117-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211131

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JORGE J. BRAVO

Mailing Address 641 FAIRWAY DR.

City

THIBODAU

State

LA

Zip Code

70301-3725

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179996

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. EDNA D. BRAXTON

Mailing Address 1515 PENN AVE
APT 302

City

WILKINSBURG

State

PA

Zip Code

15221-2659

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190241

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. DAVID BRIDGERS

Mailing Address 1208 OFFICE PARK DR

City

OXFORD

State

MS

Zip Code

38655-3597

FEC ID number of contributing
federal political committee.

C

Name of Employer
GASTROENTEROLOGIST ASSOCI-
ATES OF N. MI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
PHYSICIAN

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14215935

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ALBERT L. BRIGNER

Mailing Address 6853 S LEE CT

City

LITTLETON

State

CO

Zip Code

80127-2930

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188276

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

IRENE BRIXNER

Mailing Address 14 HARTOM RD.

City

ROCHESTER

State

NY

Zip Code

14624-4008

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190347

Amount of Each Receipt this Period

70.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

IRENE BRIXNER

Mailing Address 14 HARTOM RD.

City

ROCHESTER

State

NY

Zip Code

14624-4008

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194782

Amount of Each Receipt this Period

120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. ROBERT BROCKIE

Mailing Address 7529 MAPLECREST DR.

City

DALLAS

State

TX

Zip Code

75254-2814

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEARY CONSULTANTS OF NORTH
TECH

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196528

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. HARRIET B. BROOKS

Mailing Address 329 S ADELIA ST

City

SPRINGFIELD

State

IL

Zip Code

62704-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212343

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. HARRIET B. BROOKS

Mailing Address 329 S ADELIA ST

City

SPRINGFIELD

State

IL

Zip Code

62704-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213658

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MARILYN BROOKS

Mailing Address 457 E SILVER REEF RD

City

CASA GRANDE

State

AZ

Zip Code

85122-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226526

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL BROOKS

Mailing Address 3900 N CITRUS RD

City

GOODYEAR

State

AZ

Zip Code

85395-9213

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

FARMER

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14210072

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PATRICIA BROOKHART

Mailing Address 11506 ST.DAVIDS LANE

City

LUTHERVILLE

State

MD

Zip Code

21093-1626

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

NONE

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187314

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PATRICIA BROOKHART

Mailing Address 11506 ST.DAVIDS LANE

City

LUTHERVILLE

State

MD

Zip Code

21093-1626

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196814

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ARTHUR W. BROUGHTON

Mailing Address 156 GULFSTREAM DR.

City

JUPITER

State

FL

Zip Code

33469-2085

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193461

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JACK F. BROWDER

Mailing Address 4149 AMHERST

City

HOUSTON

State

TX

Zip Code

77005-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHERN STAR GENERATION,
LLC

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198887

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

740.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. EDDIE M. BROWN

Mailing Address 3878 KENWOOD DR

City

ODESSA

State

TX

Zip Code

79762-7018

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224573

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EDWIN G. BROWN

Mailing Address 132 LITTLE CRK DR

City

CRAWFORDVILLE

State

FL

Zip Code

32327-3022

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14246646

Amount of Each Receipt this Period

-205.00

CONTRIBUTION

CHARGED BACK

C.

Full Name (Last, First, Middle Initial)

MR. GARY T. BROWN

Mailing Address 49866 S PARK CIR.

City

EAST LIVERPOOL

State

OH

Zip Code

43920-9587

FEC ID number of contributing
federal political committee.

C

Name of Employer
B3S INC

Occupation
SERVICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179983

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. JAMES E. BROWN, JR.

Mailing Address 3000 GULF SHORE BLVD N APT 212

City

NAPLES

State

FL

Zip Code

34103-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184399

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. KERRY BROWN

Mailing Address 204 N MAGDALEN SQUARE

City

ABBEVILLE

State

LA

Zip Code

70510-4645

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188676

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RALPH S. BROWN

Mailing Address 65 LILAC DR

City

HONEY BROOK

State

PA

Zip Code

19344-8640

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224423

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PATRICIA L. BRUBAKER

Mailing Address 393 FEARRINGTON POST

City

PITTSBORO

State

NC

Zip Code

27312-8518

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217948

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RUDOLPH D. BRUIJN

Mailing Address 11348 CANDOR ST

City

CERRITOS

State

CA

Zip Code

90703-6524

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190232

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID A. BRUNE

Mailing Address 6420 CLOISTER GATE DRIVE

City

BALTIMORE

State

MD

Zip Code

21212-1057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185417

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID A. BRUNE

Mailing Address 6420 CLOISTER GATE DRIVE

City

BALTIMORE

State

MD

Zip Code

21212-1057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222215

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ANTHONY W. BRYANT

Mailing Address 108 N BARSTOW ST.

City

WAUKESHA

State

WI

Zip Code

53186-4928

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTURY FENCE CO.

Occupation
BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208261

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JAMES W. BRYANT

Mailing Address 12239 PECAN FOREST DR.

City

DALLAS

State

TX

Zip Code

75230-2396

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221515

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DANIEL J. BUCKLEY

Mailing Address 4284 S. HUDSON PARKWAY

City

CHERRY HILLS VILLA

State

CO

Zip Code

80113-5015

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181882

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. CURTIS BUDDINGH

Mailing Address 73345 HIGHWAY 111
STE 201

City

PALM DESERT

State

CA

Zip Code

92260-3909

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14195324

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL V. BUDIG

Mailing Address 5304 E SILVER SPUR LN

City

SPOKANE

State

WA

Zip Code

99217-9337

FEC ID number of contributing
federal political committee.

C

Name of Employer
EVERGREEN TREE CARE

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202573

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARY BUEGER

Mailing Address 115 STONY RIDGE CT

City

HILLSDALE

State

MI

Zip Code

49242-1154

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185932

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES BUICK

Mailing Address 2047 LITTLE HERON CT. SE

City

GRAND RAPIDS

State

MI

Zip Code

49546-5766

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196792

Amount of Each Receipt this Period

225.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JOANNE BUNGE

Mailing Address 6897 HIGHWAY 71

City

GARWOOD

State

TX

Zip Code

77442-4163

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187430

Amount of Each Receipt this Period

135.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. KATHLEEN BURKE

Mailing Address 19353 RILLING HILLS DR

City

CULPEPER

State

VA

Zip Code

22701-8344

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197127

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. LOUISE J. BURKE

Mailing Address 250 E. WARREN STREET

City

ISELIN

State

NJ

Zip Code

08830-1256

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192355

Amount of Each Receipt this Period

90.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

J. BURLEY

Mailing Address 3847 GREENLEAF CIR

City

KALAMAZOO

State

MI

Zip Code

49008-2510

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186784

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WALLACE D. BURNETT

Mailing Address 6218 BERKELEY RD
STE. 363

City State Zip Code
ALEXANDRIA VA 22307-1120

FEC ID number of contributing
federal political committee.

C

Name of Employer
DENNY MILLER ASSOCIATES
INC.

Occupation
C O O & GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189708

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JUDITH O. BURNS

Mailing Address 189 OAK ROAD

City State Zip Code
ALAMO CA 94507-2760

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188479

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JUDITH O. BURNS

Mailing Address 189 OAK ROAD

City State Zip Code
ALAMO CA 94507-2760

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212521

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JUDITH O. BURNS

Mailing Address 189 OAK ROAD

City

ALAMO

State

CA

Zip Code

94507-2760

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14221967

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEPHEN D. BURNS

Mailing Address 28940 SCOTT RD

City

MENIFEE

State

CA

Zip Code

92584-9508

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202204

Amount of Each Receipt this Period

165.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TIM BURRIDGE

Mailing Address PO BOX 1176

City

CASPER

State

WY

Zip Code

82602-1176

FEC ID number of contributing
federal political committee.

C

Name of Employer
LISA BURRIDGE & ASSOCIATES

Occupation

REAL ESTATE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14210056

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. SONDR A. BUTHERUS

Mailing Address 1500 BUCKINGHAM DR

City

LINCOLN

State

NE

Zip Code

68506-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer
BUTHERUS, MASER, & LOVE,
ET AL

Occupation

FAMILY SERVICE ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188342

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

CHARLES BUTT

Mailing Address 9461 OAK DR.

City

SPRINGDALE

State

AR

Zip Code

72762-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186782

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CHARLES BUTT

Mailing Address 9461 OAK DR.

City

SPRINGDALE

State

AR

Zip Code

72762-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217497

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CHARLES BUTT

Mailing Address 9461 OAK DR.

City State Zip Code
SPRINGDALE AR 72762-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223945

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MARY BYRNE

Mailing Address 2630 S WILLIAMS CT.

City State Zip Code
SPRINGFIELD MO 65807-5552

FEC ID number of contributing
federal political committee.

C

Name of Employer
DRURY UNIVERSITY

Occupation
ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202811

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. NICHOLAS S. CAGGIANO, SR.

Mailing Address 8 N 1ST ST

City State Zip Code
REHOBOTH BCH DE 19971-2116

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223810

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WILLIAM D. CALKINS

Mailing Address PO BOX 617

City

EPHRAIM

State

WI

Zip Code

54211-0617

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14201918

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LARRY A. CALUFETTI

Mailing Address 24 MINNETONKA RD.

City

FORT LAUDERDALE

State

FL

Zip Code

33308-2909

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202075

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. EILEEN M. CAMPBELL

Mailing Address 411 THAMER LANE

City

HOUSTON

State

TX

Zip Code

77024-6939

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194218

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1920.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MILTON CAMPBELL

Mailing Address 500 W 23RD ST #209

City

HOPE

State

AR

Zip Code

71801-8129

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184745

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SUSAN A. CAMPBELL

Mailing Address 824 FRANDORA LN

City

HOUSTON

State

TX

Zip Code

77024-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211095

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. CAROL S. CANFIELD

Mailing Address PO BOX 220

City

COLD SPRING

State

NY

Zip Code

10516-0220

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175526

Amount of Each Receipt this Period

170.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. FRANCIS J. CANTREL, JR.

Mailing Address 8819 KENSINGTON PKWY

City

CHEVY CHASE

State

MD

Zip Code

20815-6744

FEC ID number of contributing
federal political committee.

C

Name of Employer
VERIZON

Occupation

BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194202

Amount of Each Receipt this Period

600.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAN M. CARASSO

Mailing Address 7856 RANCHITO AVENUE

City

PANORAMA CITY

State

CA

Zip Code

91402-6524

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

HOTEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206730

Amount of Each Receipt this Period

410.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRANCIS CARAVELLI

Mailing Address 713 CRISFIELD WAY

City

ANNAPOLIS

State

MD

Zip Code

21401-4576

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAURICE ELGE SUPPLY

Occupation

EXECUTIVE V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184986

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GIRO CARBONE

Mailing Address 12601 BLUE MOUNTAIN COURT

City

NORTH POTOMAC

State

MD

Zip Code

20878-3500

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189728

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NESTOR T. CARBONELL

Mailing Address 25 STONEY WILDE LANE

City

GREENWICH

State

CT

Zip Code

06830-3408

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CONSULTANT

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202378

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES CARDWELL

Mailing Address 817 ROSINANTE RD.

City

EL PASO

State

TX

Zip Code

79922-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224500

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN G. CARDWELL

Mailing Address 18927 DE ENCLAVE

City

SAN ANTONIO

State

TX

Zip Code

78258-3810

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Transaction ID: SA11.14222094

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CLINT D. CARLSON

Mailing Address 2100 MCKINNEY AVENUE
16TH FLOOR

City

DALLAS

State

TX

Zip Code

75201-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARLSON CAPITAL, L.P.Occupation
PORTFOLIO MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14221939

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DEBORAH A. CARMICHAEL

Mailing Address 15875 IRVINE ROAD

City

WINCHESTER

State

KY

Zip Code

40391-9339

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14219123

Amount of Each Receipt this Period

120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. EDWIN L. CARPENTER

Mailing Address 160 GLENDALE AVE

City

UNION CITY

State

MI

Zip Code

49094-9313

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190207

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DAVID CARR

Mailing Address 613 W 12TH. ST. APT. A

City

JUNCTION CITY

State

KS

Zip Code

66441-4598

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181604

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DEE CARR

Mailing Address P.O. BOX 216

City

SNYDER

State

TX

Zip Code

79550-0216

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194559

Amount of Each Receipt this Period

24.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

444.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. DELORES J. CARTER

Mailing Address 785 COUNTY RD. 279

City

NIOTA

State

TN

Zip Code

37826-2313

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180051

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD CARTER

Mailing Address RR 2

City

WADENA

State

MN

Zip Code

56482

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186807

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD CARTER

Mailing Address RR 2

City

WADENA

State

MN

Zip Code

56482

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14223793

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. DONALD CARTER

Mailing Address PO BOX 2314

City

RANCHO SANTA FE

State

CA

Zip Code

92067-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198039

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD E. CARTER

Mailing Address 1916 QUAY ROAD 66

City

SAN JON

State

NM

Zip Code

88434-9798

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197242

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD E. CARTER

Mailing Address 1916 QUAY ROAD 66

City

SAN JON

State

NM

Zip Code

88434-9798

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208894

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GEORGE K. CARTER

Mailing Address 140 OAKLAND DR.

City

KINGSTREE

State

SC

Zip Code

29556-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181082

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GEORGE K. CARTER

Mailing Address 140 OAKLAND DR.

City

KINGSTREE

State

SC

Zip Code

29556-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181083

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GEORGE K. CARTER

Mailing Address 140 OAKLAND DR.

City

KINGSTREE

State

SC

Zip Code

29556-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210803

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GEORGE K. CARTER

Mailing Address 140 OAKLAND DR.

City

KINGSTREE

State

SC

Zip Code

29556-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210824

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

TELFRED CARTWRIGHT

Mailing Address 605 SE 2ND PL #4

City

GAINESVILLE

State

FL

Zip Code

32601-6877

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RECYCLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185424

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

TELFRED CARTWRIGHT

Mailing Address 605 SE 2ND PL #4

City

GAINESVILLE

State

FL

Zip Code

32601-6877

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RECYCLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195768

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TELFRED CARTWRIGHT

Mailing Address 605 SE 2ND PL #4

City

GAINESVILLE

State

FL

Zip Code

32601-6877

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RECYCLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.1422208

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JEREMY CASSELS-SMITH

Mailing Address 4440 MOUNT ZION RD

City

UPPERCO

State

MD

Zip Code

21155-9333

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179977

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN CASTELLANI

Mailing Address 1600 30TH STREET NW

City

WASHINGTON

State

DC

Zip Code

20007-2903

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHRMA

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194150

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN CASTERLINE

Mailing Address 118 CLIFF RD E

City

WADING RIVER

State

NY

Zip Code

11792-1211

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14216042

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARTHA CASTEEL

Mailing Address 62511 LOCUST RD

City

SOUTH BEND

State

IN

Zip Code

46614-9200

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

C.E.O.

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202784

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

EDWARD W. CASWELL

Mailing Address 610 VINCENT DR.

City

IRWIN

State

PA

Zip Code

15642-2641

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195891

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CORBETT D. CAUDILL

Mailing Address 5205 SHAKER RD.

City

FRANKLIN

State

OH

Zip Code

45005-5153

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186774

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. J. L. CAUTHEN

Mailing Address 1500 LAKE RD. APT. 10

City

BELTON

State

TX

Zip Code

76513-1340

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185390

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. J. L. CAUTHEN

Mailing Address 1500 LAKE RD. APT. 10

City

BELTON

State

TX

Zip Code

76513-1340

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213393

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WYLIE D. CAVIN, III

Mailing Address 6804 VIA CORRETO DR

City

AUSTIN

State

TX

Zip Code

78749-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190490

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID CENTANNI

Mailing Address 606 E 8TH ST

City

HOUSTON

State

TX

Zip Code

77007-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202159

Amount of Each Receipt this Period

225.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LOUIE CESIN

Mailing Address 2256 SW 16TH CT.

City

MIAMI

State

FL

Zip Code

33145-3931

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194311

Amount of Each Receipt this Period

220.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

695.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. KIRSTEN ARDLEIGH CHADWICK

Mailing Address 601 PRESIDENT FORD LANE

City State Zip Code
ALEXANDRIA VA 22302-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIERCE, ISAKOWITZ & BLALO-
CK

Occupation
GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180452

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN H. CHAIN

Mailing Address 416 VALLEY VISCO DR STE 700

City State Zip Code
SCOTTSBLUFF NE 69361

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208772

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. RAY B. CHAMBERS

Mailing Address 1431 WOODACRE DRIVE

City State Zip Code
MCLEAN VA 22101-2533

FEC ID number of contributing
federal political committee.

C

Name of Employer
RBC ASSOCIATES

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194180

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 96 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WALTER R. CHAMBERS

Mailing Address 4505 HEADLEYS MILL RD SW

City

PATASKALA

State

OH

Zip Code

43062-8685

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203459

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BILL B. CHANDLER

Mailing Address 965 BROADVIEW PL

City

COLORADO SPGS

State

CO

Zip Code

80904-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194713

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JEANNE O. CHAPMAN

Mailing Address 3801 VILLAGE VIEW DR. APT. 161

City

GAINESVILLE

State

GA

Zip Code

30506-4339

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192839

Amount of Each Receipt this Period

105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JEANNE O. CHAPMAN

Mailing Address 3801 VILLAGE VIEW DR. APT. 161

City

GAINESVILLE

State

GA

Zip Code

30506-4339

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193513

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARY S. CHAPMAN

Mailing Address 707 N SUMMIT CREST CT

City

SPARTANBURG

State

SC

Zip Code

29307-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190868

Amount of Each Receipt this Period

125.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. VICTOR IRVIN CHAPMAN

Mailing Address 4201 CLARK LN. LOT 69

City

COLUMBIA

State

MO

Zip Code

65202-4167

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.50

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201254

Amount of Each Receipt this Period

187.50

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

412.50

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. P Y. CHENG

Mailing Address 33744 WHIMBREL RD

City

FREMONT

State

CA

Zip Code

94555-1341

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188334

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD C. CHEWNING

Mailing Address 1923 E JOYCE BLVD APT 150

City

FAYETTEVILLE

State

AR

Zip Code

72703-5169

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190851

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD C. CHEWNING

Mailing Address 1923 E JOYCE BLVD APT 150

City

FAYETTEVILLE

State

AR

Zip Code

72703-5169

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14219222

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BARBARA J. CHIAPPISI

Mailing Address 786 GREENDALE AVE

City

NEEDHAM

State

MA

Zip Code

02492-4348

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222603

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GLENN C. CHRISTENSON

Mailing Address 1528 MACDONALD RANCH DR

City

HENDERSON

State

NV

Zip Code

89012-7249

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INVESTOR

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14216822

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LYNNE CHRISTIAN

Mailing Address 10410 N CAVE CREEK RD.
UNIT 1023

City

PHOENIX

State

AZ

Zip Code

85020-1611

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175513

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

760.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RAY R. CHRISTENSEN

Mailing Address 992 OAK HILLS WAY

City

SALT LAKE CTY

State

UT

Zip Code

84108-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188356

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAY R. CHRISTENSEN

Mailing Address 992 OAK HILLS WAY

City

SALT LAKE CTY

State

UT

Zip Code

84108-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14211951

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BURTON N. CHUBECK

Mailing Address 6230 BUCKINGHAM ST.

City

SARASOTA

State

FL

Zip Code

34238-2757

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188369

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

335.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 760

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH CIAK

Mailing Address 3500 PACKERLAND DR

City

DE PERE

State

WI

Zip Code

54115-9034

FEC ID number of contributing
federal political committee.

C

Name of Employer
COM ION

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180302

Amount of Each Receipt this Period

260.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. ROBERT C. CIARDULLO

Mailing Address 135 OSBORN RD

City

HARRISON

State

NY

Zip Code

10528-1017

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219727

Amount of Each Receipt this Period

325.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

FRANK M. CICILEO

Mailing Address 625 S. 9TH ST.

City

NEW HYDE PARK

State

NY

Zip Code

11040-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188077

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

615.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRANK M. CICILEO

Mailing Address 625 S. 9TH ST.

City

NEW HYDE PARK

State

NY

Zip Code

11040-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190695

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

FRANK M. CICILEO

Mailing Address 625 S. 9TH ST.

City

NEW HYDE PARK

State

NY

Zip Code

11040-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195970

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

FRANK M. CICILEO

Mailing Address 625 S. 9TH ST.

City

NEW HYDE PARK

State

NY

Zip Code

11040-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210902

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRANK M. CICILEO

Mailing Address 625 S. 9TH ST.

City

NEW HYDE PARK

State

NY

Zip Code

11040-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214421

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROSALIE G. CIMINELLI

Mailing Address 970 CAPE MARCO DR. APT. 1602

City

MARCO ISLAND

State

FL

Zip Code

34145-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210689

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DEBRA CITO

Mailing Address P.O. BOX 570

City

BOONES MILL

State

VA

Zip Code

24065-0570

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221762

Amount of Each Receipt this Period

125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JACOB CITRIN

Mailing Address 2305 NW 107TH AVE
NO. 107

City State Zip Code
DORAL FL 33172-2182

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARGO VENTURES LLC

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180442

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. NAOMI R. CLADY

Mailing Address 1140 LAVINA AVE

City State Zip Code
BUCYRUS OH 44820-3036

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177692

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. NAOMI R. CLADY

Mailing Address 1140 LAVINA AVE

City State Zip Code
BUCYRUS OH 44820-3036

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213834

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHARLOTTE A. CLARK

Mailing Address 808 W MAIN ST.

City

GUN BARREL CITY

State

TX

Zip Code

75156-5311

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217735

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ERNIE CLARK

Mailing Address 1012 S. CHURCH STREET

City

BROOKHAVEN

State

MS

Zip Code

39601-4006

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

REAL ESTATE SALES

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14192033

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RICHARD G. CLARK

Mailing Address 4619 PEWTER LN.

City

MANLIUS

State

NY

Zip Code

13104-9329

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192894

Amount of Each Receipt this Period

125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

745.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RICHARD G. CLARK

Mailing Address 4619 PEWTER LN.

City

MANLIUS

State

NY

Zip Code

13104-9329

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14216313

Amount of Each Receipt this Period

175.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT CLARKE

Mailing Address 3829 RILLING AVE

City

ERIE

State

PA

Zip Code

16509-1365

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190850

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ROY C. CLARK, JR.

Mailing Address 703 N MANSFIELD ST.

City

ALEXANDRIA

State

VA

Zip Code

22304-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196815

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THOMAS J. CLARK

Mailing Address 4510 PINE MOUNTAIN RD.

City

BIRMINGHAM

State

AL

Zip Code

35213-1828

FEC ID number of contributing
federal political committee.

C

Name of Employer
KBR

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192474

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

REV. WILLIAM T. CLARKE

Mailing Address 5133 NEWLANDS RD.

City

COLUMBIA

State

NC

Zip Code

27925-8547

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182797

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

REV. WILLIAM T. CLARKE

Mailing Address 5133 NEWLANDS RD.

City

COLUMBIA

State

NC

Zip Code

27925-8547

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224950

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. CLARY

Mailing Address 404 KELLY PLANTATION DR
UNIT 1507

City	State	Zip Code
DESTIN	FL	32541-8471

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14226075

Amount of Each Receipt this Period

850.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

RICHARD CLAUSS

Mailing Address 21672 BLOSS AVE

City	State	Zip Code
HILMAR	CA	95324-9734

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14205057

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRED F. CLIFFORD

Mailing Address 9981 LICKINGHOLE RD

City	State	Zip Code
ASHLAND	VA	23005-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOCKSIDE MARINE INC.Occupation
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14198049

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1510.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KEN CLOCK

Mailing Address 1629 SE 11TH AVE

City

PORTLAND

State

OR

Zip Code

97214-4771

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

EQUIPMENT DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14187144

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. CLOHAN, III

Mailing Address 2711 SILKWOOD COURT

City

OAKTON

State

VA

Zip Code

22124-1455

FEC ID number of contributing
federal political committee.**C**Name of Employer
DITTMAR CO.

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14221944

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BRIAN W. CLYMER

Mailing Address 62 BROOKVILLE HOLLOW ROAD

City

STOCKTON

State

NJ

Zip Code

08559-2006

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14189729

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS G. COFFEY

Mailing Address 180 7TH AVE S

City

NAPLES

State

FL

Zip Code

34102-6857

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208755

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM J. COFFEY

Mailing Address 55 MAOLIS RD

City

NAHANT

State

MA

Zip Code

01908-1339

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14215988

Amount of Each Receipt this Period

125.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

EDWIN A. COHEN

Mailing Address 25 SUTTON PL. S APT. 16G

City

NEW YORK

State

NY

Zip Code

10022-2461

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194764

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

EDWIN A. COHEN

Mailing Address 25 SUTTON PL. S APT. 16G

City

NEW YORK

State

NY

Zip Code

10022-2461

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217486

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAY R. COILE

Mailing Address 1540 REGENCY WALK

City

BOGART

State

GA

Zip Code

30622-5837

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANDERSON MERCHANDISERS

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211714

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. BARBARA G. COKER

Mailing Address 33136 STATE HWY. 44

City

SHINGLETOWN

State

CA

Zip Code

96088-9797

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190757

Amount of Each Receipt this Period

170.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN P. COLE

Mailing Address P.O. BOX 6190

City

CAREFREE

State

AZ

Zip Code

85377-6190

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14197287

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ANITA COLLELUORI

Mailing Address 5719 PENROD ST

City

CORONA

State

NY

Zip Code

11368-3935

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14193084

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ANITA COLLELUORI

Mailing Address 5719 PENROD ST

City

CORONA

State

NY

Zip Code

11368-3935

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14217478

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RICHARD D. COLLINS

Mailing Address 6955 CARLISLE CT APT D130

City

NAPLES

State

FL

Zip Code

34109-8972

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202064

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM D. COLLINS

Mailing Address 20802 PLEASANT PARK RD

City

CONIFER

State

CO

Zip Code

80433-6703

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

GEOLOGIST

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14216230

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CLAIR I. COLVIN

Mailing Address 112 PINENEEDLE ROAD

City

STATESBORO

State

GA

Zip Code

30458-6039

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14187073

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 114 / 760
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH P. COLWIN

Mailing Address W1116 COUNTY ROAD F

City

CAMPBELLSPORT

State

WI

Zip Code

53010-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer

MID-STATES ALUMINUM CORP.

Occupation

C.E.O.

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14186209

Amount of Each Receipt this Period

-2000.00

CONTRIBUTION

CHARGED BACK

B.

Full Name (Last, First, Middle Initial)

JOHN L. COMEAU

Mailing Address 121 WOODSIE AVE

City

RIDGEWOOD

State

NJ

Zip Code

07450-5016

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INSURANCE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190178

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

FOSTER F. COMSTOCK

Mailing Address 720 WELLMAN AVE

City

N CHELMSFORD

State

MA

Zip Code

01863-1366

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14194094

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

-1845.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DOLORES CONLEY

Mailing Address 1591 HOLLY HILL DR.

City

BETHEL PARK

State

PA

Zip Code

15102-3507

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188381

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DOLORES CONLEY

Mailing Address 1591 HOLLY HILL DR.

City

BETHEL PARK

State

PA

Zip Code

15102-3507

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206715

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. KATHLEEN CONLON

Mailing Address 18811 HOMESTEAD LN

City

DURANGO

State

IA

Zip Code

52039-9458

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194346

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THOMAS CONNORS

Mailing Address 23W380 FOXWOOD CT.

City

NAPERVILLE

State

IL

Zip Code

60540-9302

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRMCC RIDGEOccupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	1

Transaction ID: SA11.14207713

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BOB CONRAD

Mailing Address 1000 HUDSON STREET

City

HOBOKEN

State

NJ

Zip Code

07030-5249

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	1

Transaction ID: SA11.14220832

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. KAREN S. CONRAD

Mailing Address 2303 HAMPTON AVE

City

NASHVILLE

State

TN

Zip Code

37215-1405

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	1

Transaction ID: SA11.14202229

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

920.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. KATHERINE E. CONSTABLE

Mailing Address 2133 RICHMOND RD

City

TROY

State

VA

Zip Code

22974-3730

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14219767

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

BILL COOGAN

Mailing Address 2300 WOODED OAK PL.

City

MIDLOTHIAN

State

VA

Zip Code

23113-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIRSTMARK CORP.Occupation
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14198587

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. CHERYL J. COOPER

Mailing Address 11741 RD 191

City

OAKWOOD

State

OH

Zip Code

45873-9346

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
AGRI-BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14200119

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1610.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. EDWIN L. COOPER

Mailing Address 7700 SEAWALL BLVD.
APT. 203

City

GALVESTON

State

TX

Zip Code

77551-3401

FEC ID number of contributing
federal political committee.

C

Name of Employer
COBRA CONSULTING, INC.

Occupation

BUSINESS MANAGER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190275

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. GAIL F. COOPER

Mailing Address 4956 EXETER DR.

City

SUFFOLK

State

VA

Zip Code

23434-7099

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190224

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GAIL F. COOPER

Mailing Address 4956 EXETER DR.

City

SUFFOLK

State

VA

Zip Code

23434-7099

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.14220720

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES C. COOPER

Mailing Address P.O. BOX 10881

City

CONWAY

State

AR

Zip Code

72034-0015

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209823

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RONALD H. COOPER

Mailing Address 1700 E. TUFTS AVENUE

City

ENGLEWOOD

State

CO

Zip Code

80113-6019

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLEAR CHANNEL OUTDOOR

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198326

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ANNA M. COPLEY

Mailing Address P.O. BOX 127

City

CRUM

State

WV

Zip Code

25669-0127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193168

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1160.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ANNA M. COPLEY

Mailing Address P.O. BOX 127

City

CRUM

State

WV

Zip Code

25669-0127

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14216585

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BARCLAY F. CORBUS

Mailing Address 543 PRESIDIO BOULEVARD

City

SAN FRANCISCO

State

CA

Zip Code

94129-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Transaction ID: SA11.14229238

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CHARLES CORCORAN

Mailing Address 11601 CAPLINGER RD.

City

SILVER SPRING

State

MD

Zip Code

20904-2768

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14199441

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2810.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

H. COREY

Mailing Address 80 HEREFORD RD

City

BRONXVILLE

State

NY

Zip Code

10708-5417

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194371

Amount of Each Receipt this Period

240.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BILL D. CORNELIUS

Mailing Address 221 RACCOON RUN

City

POWELL

State

OH

Zip Code

43065-9355

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191863

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BILL D. CORNELIUS

Mailing Address 221 RACCOON RUN

City

POWELL

State

OH

Zip Code

43065-9355

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194783

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DAN CORRIGAN

Mailing Address 7150 20TH ST STE E

City

VERO BEACH

State

FL

Zip Code

32966-8805

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186635

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DAN CORRIGAN

Mailing Address 7150 20TH ST STE E

City

VERO BEACH

State

FL

Zip Code

32966-8805

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186636

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. LUKE CORSTEN

Mailing Address 5805 HARELSON DR

City

SAINT GABRIEL

State

LA

Zip Code

70776-5124

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191645

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

960.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. DONELDA COSTELLO

Mailing Address 424 W FRANKLIN ST APT 124

City

REED CITY

State

MI

Zip Code

49677-1083

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186261

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DONELDA COSTELLO

Mailing Address 424 W FRANKLIN ST APT 124

City

REED CITY

State

MI

Zip Code

49677-1083

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190632

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DONELDA COSTELLO

Mailing Address 424 W FRANKLIN ST APT 124

City

REED CITY

State

MI

Zip Code

49677-1083

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208230

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. DONELDA COSTELLO

Mailing Address 424 W FRANKLIN ST APT 124

City

REED CITY

State

MI

Zip Code

49677-1083

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210196

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NATHAN PIERCE COUCH

Mailing Address 5 HIGH ROCK RD.

City

DOVER

State

MA

Zip Code

02030-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181061

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. NATHAN PIERCE COUCH

Mailing Address 5 HIGH ROCK RD.

City

DOVER

State

MA

Zip Code

02030-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190759

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KEVIN L. COUNTRYMAN

Mailing Address 3311 BUCKSKIN RD.

City

HICKSVILLE

State

OH

Zip Code

43526-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179432

Amount of Each Receipt this Period

450.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES W. COUPE

Mailing Address P.O. BOX 87

City

KEALAKEKUA

State

HI

Zip Code

96750-0087

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

COMMERCIAL REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207361

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JUDITH M. COURI

Mailing Address 1215 SEITZ DR

City

WAUKESHA

State

WI

Zip Code

53186-6745

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198086

Amount of Each Receipt this Period

330.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

940.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DORIS COUTURIER

Mailing Address 11 S ADAMS ST. APT. 704W

City

DENVER

State

CO

Zip Code

80209-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190662

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DORIS COUTURIER

Mailing Address 11 S ADAMS ST. APT. 704W

City

DENVER

State

CO

Zip Code

80209-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192342

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GLENN D. COVERT

Mailing Address 457 STONEGATE WAY

City

MANTENO

State

IL

Zip Code

60950-3717

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223556

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES W. COWARD

Mailing Address 135 KATHRYN PL.

City

BRANDON

State

MS

Zip Code

39042-9777

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14195070

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES W. COWARD

Mailing Address 135 KATHRYN PL.

City

BRANDON

State

MS

Zip Code

39042-9777

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14207021

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT C. COWEN

Mailing Address 2756 INDIAN SPRINGS RD

City

MARIANNA

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196278

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT C. COWEN

Mailing Address 2756 INDIAN SPRINGS RD

City

MARIANNA

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197882

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT C. COWEN

Mailing Address 2756 INDIAN SPRINGS RD

City

MARIANNA

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202049

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ROBERT C. COWN

Mailing Address 2756 INDIAN SPRINGS RD

City

MARIANNA

State

FL

Zip Code

32446-6889

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223466

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. BERRY R. COX

Mailing Address 2100 MCKINNEY AVENUE
STE. 1700

City State Zip Code
DALLAS TX 75201-6975

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194156

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

J. C. COYLE

Mailing Address 1505 MONARCH OAKS ST.

City State Zip Code
HOUSTON TX 77055-3435

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188168

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. CRAIG

Mailing Address P.O. BOX 690

City State Zip Code
OLNEY TX 76374-0690

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INDEPENDENT OIL PRODUCER

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14221014

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JIM F. CRAMER

Mailing Address 2817 S. LIPSCOMB

City

AMARILLO

State

TX

Zip Code

79109-3531

FEC ID number of contributing
federal political committee.

C

Name of Employer
DATA FLOW, INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198386

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JOHN CRAMER

Mailing Address 23 KEEL WAY

City

MASHPEE

State

MA

Zip Code

02649-4012

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190195

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JOHN CRAMER

Mailing Address 23 KEEL WAY

City

MASHPEE

State

MA

Zip Code

02649-4012

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14200973

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THEODORE F. CRAVER

Mailing Address 6 INDIAN HILL LANE

City

HILTON HEAD ISLAND

State

SC

Zip Code

29926-1259

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14213952

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA CRAWFORD

Mailing Address 356 TOPAZ ST.

City

REDWOOD CITY

State

CA

Zip Code

94062-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210355

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA CRAWFORD

Mailing Address 356 TOPAZ ST.

City

REDWOOD CITY

State

CA

Zip Code

94062-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210525

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA CRAWFORD

Mailing Address 356 TOPAZ ST.

City

REDWOOD CITY

State

CA

Zip Code

94062-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14210583

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAY CRAWFORD

Mailing Address 11803 E 975 N

City

ODON

State

IN

Zip Code

47562-5383

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14185422

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WILLIAM CRAWFORD

Mailing Address 3313 EDEN PARK DRIVE

City

CARMEL

State

IN

Zip Code

46033-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14189754

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. J. ROBERT CREIGHTON

Mailing Address 660 CAMINO DE LOS MARES UNIT 3

City

SAN CLEMENTE

State

CA

Zip Code

92673-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196082

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JUAN CRENIER

Mailing Address P.O. BOX 8562

City

HORSESHOE BAY

State

TX

Zip Code

78657-8562

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179507

Amount of Each Receipt this Period

350.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CARMELO CRISAFULLI

Mailing Address 283 MURRAY AVE

City

DELMAR

State

NY

Zip Code

12054-9708

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214078

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

720.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CARMELO CRISAFULLI

Mailing Address 283 MURRAY AVE

City

DELMAR

State

NY

Zip Code

12054-9708

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14214145

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DAVID T. CRIST

Mailing Address 565 S MAIN ST.

City

JERSEY SHORE

State

PA

Zip Code

17740-7600

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14225912

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES CROSBY

Mailing Address 6740 E 1200 N

City

OSSIAN

State

IN

Zip Code

46777-9724

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14213935

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES CROWNOVER

Mailing Address TWO HOUSTON CENTER
STE. 3675

City HOUSTON State TX Zip Code 77010-1022

FEC ID number of contributing
federal political committee.**C**Name of Employer
RICE UNIVERSITY BOARD OF
TRUSTEES

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194205

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT CUMINALE

Mailing Address 912 INGRAHAM PL

City CHARLOTTE State NC Zip Code 28270-1039

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14181795

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ROBERT CUMINALE

Mailing Address 912 INGRAHAM PL

City CHARLOTTE State NC Zip Code 28270-1039

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14217400

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH CUMMINGS

Mailing Address 742 SOMERSET AVE

City

NORTH DIGHTON

State

MA

Zip Code

02764-1826

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197688

Amount of Each Receipt this Period

1100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. RONIL L. CUMMINGS

Mailing Address 12907 W. SUNSET BLVD.

City

LOS ANGELES

State

CA

Zip Code

90049-2643

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14216150

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. RONIL L. CUMMINGS

Mailing Address 12907 W. SUNSET BLVD.

City

LOS ANGELES

State

CA

Zip Code

90049-2643

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14216152

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM CUMMINS

Mailing Address 841 RACOON LN

City

LORIDA

State

FL

Zip Code

33857-9531

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177947

Amount of Each Receipt this Period

280.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JEAN R. DABBS

Mailing Address 5911 SOUTHERN HILLS DR

City

HOUSTON

State

TX

Zip Code

77069-1361

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177670

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HARRY J. DAHL

Mailing Address PO BOX 788

City

LA CROSSE

State

WI

Zip Code

54602-0788

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
AUTO DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14183900

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

690.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FREDERICK L. DALEO

Mailing Address 18590 MARTINIQUE CT.

City

VILLA PARK

State

CA

Zip Code

92861-3122

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14195924

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

FREDERICK L. DALEO

Mailing Address 18590 MARTINIQUE CT.

City

VILLA PARK

State

CA

Zip Code

92861-3122

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14221467

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RAYMOND DAMADIAN

Mailing Address 31 FAIRBANKS BLVD.

City

WOODBURY

State

NY

Zip Code

11797-2603

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14204919

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JEFFERY T. DANIEL

Mailing Address 9990 COUNTY RD 232

City

BROWNWOOD

State

TX

Zip Code

76801-8831

FEC ID number of contributing
federal political committee.

C

Name of Employer
DANHIL CONTAINERS

Occupation

CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219679

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES D. DANNENBAUM

Mailing Address 3100 W. ALABAMA STREET

City

HOUSTON

State

TX

Zip Code

77098-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEC

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198336

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BETTY J. DAVIS

Mailing Address 9505 AUGUSTA AVENUE NE

City

ALBUQUERQUE

State

NM

Zip Code

87111-5820

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214167

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHESTER G. DAVIS

Mailing Address 5 CLOUDS WAY

City

HOCKESSIN

State

DE

Zip Code

19707-9397

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194167

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANKLIN N. DAVIS

Mailing Address 1752 SIESTA DRIVE

City

COTTONWOOD HEIGHTS

State

UT

Zip Code

84093-6247

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191728

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JACK E. DAVIS

Mailing Address 28 BRAZOS RIVER CIR

City

BROWNSVILLE

State

TX

Zip Code

78520-9560

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199168

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN C. DAVIS

Mailing Address 700 JOHN RINGLING BLVD.
T-912

City State Zip Code
SARASOTA FL 34236-1542

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190183

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN C. DAVIS

Mailing Address 700 JOHN RINGLING BLVD.
T-912

City State Zip Code
SARASOTA FL 34236-1542

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212518

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JUDY L. DAVIS

Mailing Address 2727 MILLER LANDING ROAD

City State Zip Code
TALLAHASSEE FL 32312-9670

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ORAL SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211779

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JUDY L. DAVIS

Mailing Address 2727 MILLER LANDING ROAD

City

TALLAHASSEE

State

FL

Zip Code

32312-9670

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ORAL SURGEON

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226003

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TIM K.A. DAVIS

Mailing Address 10155 N 2240 ROAD

City

ARAPAH0

State

OK

Zip Code

73620-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer
REDDY ICE

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219191

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES DAY

Mailing Address 1709 WAYNE AVE

City

DAYTON

State

OH

Zip Code

45410-1711

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203637

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. TROY L. DAY

Mailing Address P.O. BOX 6

City

KANNAPOLIS

State

NC

Zip Code

28082-0006

FEC ID number of contributing
federal political committee.

C

Name of Employer
DAY ENTERPRISES

Occupation

CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193063

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS A. DE CAMP

Mailing Address 3485 W M 179 HWY.

City

HASTINGS

State

MI

Zip Code

49058-7646

FEC ID number of contributing
federal political committee.

C

Name of Employer
FHI

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223351

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CAROL L. DEGEROME

Mailing Address 1422 S ATLANTIC DR

City

LANTANA

State

FL

Zip Code

33462-4706

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220779

Amount of Each Receipt this Period

750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. BETTY DEGIROLAMO

Mailing Address 12100 DENVER DR

City

PARMA

State

OH

Zip Code

44130-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14200959

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES P. DEGRUCCIO

Mailing Address 40A HILTON AVE

City

GARDEN CITY

State

NY

Zip Code

11530-4426

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197718

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BRUCE E. DELMAR

Mailing Address 2471 RIVIERA DR.

City

LAGUNA BEACH

State

CA

Zip Code

92651-1013

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ENGINEER

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201089

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

810.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JOAN D. DELVECCHIO

Mailing Address 25 BRINSMAYD AVE

City

STRATFORD

State

CT

Zip Code

06614-1362

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192399

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN DEMMER

Mailing Address 420 E MAIN ST

City

HARBOR SPRINGS

State

MI

Zip Code

49740-1516

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197252

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. CHRISTIE B. DENICOLA

Mailing Address 214 GREEN RIDGE ROAD

City

FRANKLIN LAKES

State

NJ

Zip Code

07417-2010

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194228

Amount of Each Receipt this Period

30400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN P. DENNIS

Mailing Address 3055 CASCO POINT RD.

City

WAYZATA

State

MN

Zip Code

55391-9545

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209827

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH DERR

Mailing Address 9 CAMINO LIENZO

City

SAN CLEMENTE

State

CA

Zip Code

92673-6862

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195703

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ROBERTA E. DERRICO

Mailing Address 9 GREYSTONE DR.

City

MIDDLETON

State

MA

Zip Code

01949-2371

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
APARTMENT RENTALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14180652

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. AMELIA T. DESZYCK

Mailing Address P.O. BOX 31

City

BETHANIA

State

NC

Zip Code

27010-0031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199000

Amount of Each Receipt this Period

1040.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. FRAN DI PLACIDI

Mailing Address 1530 PALISADE AVE APT 176

City

FORT LEE

State

NJ

Zip Code

07024-5471

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193261

Amount of Each Receipt this Period

600.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MONTE S. DIEBOLT

Mailing Address 125 HAZELWOOD DR

City

STATESBORO

State

GA

Zip Code

30458-9141

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED METHODIST CHURCH

Occupation
MINISTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194892

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1840.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ANTOINETTE DIEMER

Mailing Address 10919 MAIDEN DR.

City

BOWIE

State

MD

Zip Code

20720-3599

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181576

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ANTOINETTE DIEMER

Mailing Address 10919 MAIDEN DR.

City

BOWIE

State

MD

Zip Code

20720-3599

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196861

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ANTOINETTE DIEMER

Mailing Address 10919 MAIDEN DR.

City

BOWIE

State

MD

Zip Code

20720-3599

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224597

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. NANCY S. DIEMER

Mailing Address 3 WOOD ACRE ROAD

City

SAINT LOUIS

State

MO

Zip Code

63124-1062

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3244.66

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194144

Amount of Each Receipt this Period

3244.66

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CYNDI J. DIERCKS

Mailing Address P.O. BOX 567

City

BETTENDORF

State

IA

Zip Code

52722-0010

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAWNS UNLIMITED

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210872

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN S. DIEU

Mailing Address 185 COTTONWOOD LN.

City

WICKENBURG

State

AZ

Zip Code

85390-3306

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196223

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3594.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JONATHAN C. DILL

Mailing Address 10591 GLEN LAKES DR

City

BONITA SPRINGS

State

FL

Zip Code

34135-7237

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224433

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLAM J. DILLER, JR.

Mailing Address 59 HERON DR

City

AVALON

State

NJ

Zip Code

08202-1540

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201229

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THEO H. DINKINS, II

Mailing Address 200 DOMINICAN DRIVE APT 2104

City

MADISON

State

MS

Zip Code

39110-8630

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200927

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1110.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City

CAPE CORAL

State

FL

Zip Code

33904-8919

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14181411

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City

CAPE CORAL

State

FL

Zip Code

33904-8919

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14205198

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ANNE R. DINNEGAN

Mailing Address 4011 PALM TREE BLVD. APT. 303

City

CAPE CORAL

State

FL

Zip Code

33904-8919

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14210806

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH J. DIOGUARDI

Mailing Address 1607 EAGLE BAY DRIVE

City

OSSINING

State

NY

Zip Code

10562-2362

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALBANIAN AMERICAN CIVIC
LEAGUE

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194181

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. RUTH S. DISHER

Mailing Address 170 EAGLE DR S

City

CANON CITY

State

CO

Zip Code

81212-9650

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189489

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

VINCENT DITRAPANO

Mailing Address 9 WHITE BIRCH CT

City

SCHENECTADY

State

NY

Zip Code

12306-3307

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CAFE OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185263

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS MARY A. DIXON

Mailing Address 5225 EGYPT PIKE

City

CHILLICOTHE

State

OH

Zip Code

45601-8652

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14213712

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ANN M. DOGGETT

Mailing Address P.O. BOX 112

City

ROSHARON

State

TX

Zip Code

77583-0112

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14201097

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RICHARD DOLBOW

Mailing Address 12441 US HWY. 26

City

RIVERTON

State

WY

Zip Code

82501-9256

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194527

Amount of Each Receipt this Period

240.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MIKE DOLESKI

Mailing Address 6034 BROADWAY ST

City

PEARLAND

State

TX

Zip Code

77581-7806

FEC ID number of contributing
federal political committee.

C

Name of Employer
WESTSIDE VETERINARY HOSPI-
TAL

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207273

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DAVID E. DONNELL

Mailing Address 1731 CARRIGAN LN.

City

UKIAH

State

CA

Zip Code

95482-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179999

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MARY DONOFRIO

Mailing Address 330 MARGATE TER.

City

DEERFIELD

State

IL

Zip Code

60015-3449

FEC ID number of contributing
federal political committee.

C

Name of Employer
MY OWN MEALS INC

Occupation
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14189871

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

KERRY DOOLEY

Mailing Address 6355 PEGGY ST.

City

BATON ROUGE

State

LA

Zip Code

70808-4254

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOUISIANA STATE UNIVERSITY

Occupation
PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178385

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROGER A. DORF

Mailing Address 13226 SHORE VISTA DR

City

AUSTIN

State

TX

Zip Code

78732-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199404

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GLEN V. DORFLINGER

Mailing Address 8580 WOODWAY DR. APT. 1327

City

HOUSTON

State

TX

Zip Code

77063-2471

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210920

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. PRISCILLA DOUGLAS

Mailing Address 301 CLUSTER ST

City

FOLEY

State

AL

Zip Code

36535-2341

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189332

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT DOUGLAS

Mailing Address 615 25TH ST S

City

ARLINGTON

State

VA

Zip Code

22202-2529

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183130

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

T. O. DOUGLAS

Mailing Address 6730 EPPING FOREST WAY N # 1

City

JACKSONVILLE

State

FL

Zip Code

32217-2663

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14187919

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HARRY DOZIER

Mailing Address 3238 NE BRYCE STREET

City

PORTLAND

State

OR

Zip Code

97212-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
BRAKE SYSTEMS INC

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202206

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CHARLES DRACKETT

Mailing Address 100 GLENVIEW PL PH 2

City

NAPLES

State

FL

Zip Code

34108-3132

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201556

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THEODORE L. DRELL, III

Mailing Address 893 RIDGEVIEW DR.

City

PINEVILLE

State

LA

Zip Code

71360-4004

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211136

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

860.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DONALD L. DRIGGERS

Mailing Address 2165 SYLVAN POINT DR.

City

MOUNT DORA

State

FL

Zip Code

32757-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197459

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD L. DRIGGERS

Mailing Address 2165 SYLVAN POINT DR.

City

MOUNT DORA

State

FL

Zip Code

32757-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206664

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES DROGE

Mailing Address 2750 BIRCHCREST DR SE

City

GRAND RAPIDS

State

MI

Zip Code

49506

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175460

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. LOIS C. DRUM

Mailing Address 1064 W MILLS ST
APT 214

City

COLUMBUS

State

NC

Zip Code

28722-8459

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14206700

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH M. DUBERSTEIN

Mailing Address 2100 PENNSYLVANIA AVENUE NW
STE. 500

City

WASHINGTON

State

DC

Zip Code

20037-3204

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Transaction ID: SA11.14229233

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GEORGE V. DUCZAK

Mailing Address 4 CREEKSIDE LN.

City

BARRINGTON

State

IL

Zip Code

60010-9343

FEC ID number of contributing
federal political committee.

C

Name of Employer
N A C INC.Occupation
MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14180769

Amount of Each Receipt this Period

75.79

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2175.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LINDSAY A. DUFF

Mailing Address P.O. BOX 293309

City

KERRVILLE

State

TX

Zip Code

78029-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190332

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD B. DUFFEY

Mailing Address 725 MEMORIAL PKWY NW

City

HUNTSVILLE

State

AL

Zip Code

35801-5829

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALABAMA BUSINESS FORMS INC

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184959

Amount of Each Receipt this Period

600.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK J. DUGOPOLSKI

Mailing Address 39381 MAGNOLIA TRCE

City

PONCHATOULA

State

LA

Zip Code

70454-6921

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201232

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

910.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. LEROY A. DUKES

Mailing Address 531 SUNSET STRIP

City

MIAMI

State

OK

Zip Code

74354-9027

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204038

Amount of Each Receipt this Period

90.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STERLING B. DUNAWAY

Mailing Address 7560 LASCASSAS PIKE

City

LASCASSAS

State

TN

Zip Code

37085-4523

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223980

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

COL. JAMES R. DUNBAR

Mailing Address 1011 ARLINGTON BLVD. APT. 819

City

ARLINGTON

State

VA

Zip Code

22209-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182154

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN DUNCAN

Mailing Address 3131 TENNYSON ST. NW

City

WASHINGTON

State

DC

Zip Code

20015-2359

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERIDIAN RESEARCH GROUP

Occupation

POLICY ANALYST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180458

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN S. DUNK

Mailing Address 1142 BULEVAR DE PALMAS

City

MARATHON

State

FL

Zip Code

33050-2529

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194562

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT H. DUNKEL

Mailing Address 9014 NOMINI LANE

City

ALEXANDRIA

State

VA

Zip Code

22309-2811

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

GOVERNMENT AFFAIRS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194209

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD DUNN

Mailing Address 530 JUNIPERO SERRA BOULEVARD

City

SAN FRANCISCO

State

CA

Zip Code

94127-2727

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14209828

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LOUIS DUPART

Mailing Address 802 CREWS ROAD

City

GREAT FALLS

State

VA

Zip Code

22066-2443

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE NORMANDY GROUPOccupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194221

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ARTHUR P. DUPONT

Mailing Address 422 ERASTE LANDRY RD

City

LAFAYETTE

State

LA

Zip Code

70506-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14201988

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1610.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. TERRY F. DYNES

Mailing Address 1102 NORDIC DR # 207

City

DECORAH

State

IA

Zip Code

52101-1085

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192922

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARY L. EADS

Mailing Address 1839 KIRBY DRIVE

City

HOUSTON

State

TX

Zip Code

77019-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194225

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RALPH J. EADS

Mailing Address 2413 STANMORE DR

City

HOUSTON

State

TX

Zip Code

77019-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179993

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5210.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RALPH J. EADS

Mailing Address 2413 STANMORE DR

City

HOUSTON

State

TX

Zip Code

77019-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14207239

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICKY L. EASON

Mailing Address 1215 OLD COUNTY HOME RD

City

TARBORO

State

NC

Zip Code

27886-8549

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Transaction ID: SA11.14213326

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

J. W. EATHERLY

Mailing Address 519 REGENCY CROSSING

City

SOUTHLAKE

State

TX

Zip Code

76092-9501

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188216

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAROLD E. EATON

Mailing Address 4718 GUNBARREL PL

City

GRAND ISLAND

State

NE

Zip Code

68801-8504

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184962

Amount of Each Receipt this Period

105.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TOMMY ECHOLS

Mailing Address 3024 BRIDLE PATH

City

FRIENDSWOOD

State

TX

Zip Code

77546-3057

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197667

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARTIN EDWARDS

Mailing Address 4370 THOMAS PARK

City

BEAUMONT

State

TX

Zip Code

77706-7769

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211720

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2705.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MERLE J. EFFLER

Mailing Address 3423 SURREY LN

City

GOLDSBORO

State

NC

Zip Code

27530-7076

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184935

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE W. EGAN

Mailing Address 300 HOT SPRINGS ROAD
176

City

SANTA BARBARA

State

CA

Zip Code

93108-2037

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14210055

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEVE R. EHRENZELLER

Mailing Address 2989 BLACK DOG RD

City

MC ALISTERVILLE

State

PA

Zip Code

17049-8804

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211701

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN L. EHRMANN

Mailing Address 24830 88TH. DR.

City

BELLEROSE

State

NY

Zip Code

11426-2030

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213292

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

NANCY ELKAN

Mailing Address 3731 SHADE TREE TERRACE

City

PORTAGE

State

MI

Zip Code

49024-1036

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14183968

Amount of Each Receipt this Period

99.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

NANCY ELKAN

Mailing Address 3731 SHADE TREE TERRACE

City

PORTAGE

State

MI

Zip Code

49024-1036

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197911

Amount of Each Receipt this Period

198.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

507.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. EUGENE F. ELLINGWOOD, JR.

Mailing Address 10304 MAGNOLIA LN

City

LARGO

State

FL

Zip Code

33773-4280

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202218

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DORIS F. ELLIOTT

Mailing Address 23309 COMMUNITY ST.

City

CANOGA PARK

State

CA

Zip Code

91304-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186891

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DORIS F. ELLIOTT

Mailing Address 23309 COMMUNITY ST.

City

CANOGA PARK

State

CA

Zip Code

91304-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14215861

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DORIS F. ELLIOTT

Mailing Address 23309 COMMUNITY ST.

City

CANOGA PARK

State

CA

Zip Code

91304-3105

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	1	1

Transaction ID: SA11.14217327

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT S. ELLIS

Mailing Address 6703 AVONDALE DR.

City

NICHOLS HILLS

State

OK

Zip Code

73116-6001

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	1

Transaction ID: SA11.14220385

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BARBARA A. ELLSWORTH

Mailing Address 1310 LANCE CT.

City

LEBANON

State

OH

Zip Code

45036-7904

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.14204741

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. IVAN C. ELMER

Mailing Address 6145 TOMPKINS DR

City

MC LEAN

State

VA

Zip Code

22101-3236

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188209

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JAMES EDWARD ENGLEHART

Mailing Address 4931 BONITA BAY BLVD
UNIT 2401

City

BONITA SPRINGS

State

FL

Zip Code

34134-1712

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190395

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PROF. NANCY EPPERSON

Mailing Address 3780 WILL SCARLET RD.

City

WINSTON SALEM

State

NC

Zip Code

27104-1649

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
BROADCASTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198320

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. EUSTACE

Mailing Address 205 HANNA WAY

City

MENLO PARK

State

CA

Zip Code

94025-3583

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOOGLE

Occupation

SENIOR V.P., ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14221940

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CARMEN EVANGELISTA

Mailing Address 618 FREMONT AVENUE

City

S. PASADENA

State

CA

Zip Code

91030-2528

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14208838

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. CHARLES EVANS

Mailing Address 114 ACADEMY RD

City

NORTH ANDOVER

State

MA

Zip Code

01845-4022

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTH SUBURBAN EYE

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14187310

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MARIANNE D. EVANS

Mailing Address 5050 LYDA LN

City

COLORADO SPRINGS

State

CO

Zip Code

80904-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181565

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. TANIA G. EVANS

Mailing Address 370 CHESTER RD

City

GRAFTON

State

VT

Zip Code

05146-9765

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203882

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RICHARD M. FAIRBANKS

Mailing Address 3505 MAIN LODGE DR

City

MIAMI

State

FL

Zip Code

33133-5918

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAYALINA PRODUCTIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

SELF-EMPLOYED

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223452

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. STEPHEN FAIRCHILD

Mailing Address 240 FERRY RD

City

LEWISTON

State

ME

Zip Code

04240-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer
CMMC

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188979

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LLOYD A. FALCK

Mailing Address 1007 E 1400N ROAD

City

MELVIN

State

IL

Zip Code

60952-4036

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190764

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. HERTA FANKHAUSER

Mailing Address 12932 HICKORY BRANCH RD.

City

SANTA ANA

State

CA

Zip Code

92705-3491

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193075

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. MANDAN F. FARAHATI

Mailing Address 1351 E WESTLEIGH RD

City

LAKE FOREST

State

IL

Zip Code

60045-3335

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAGNA HEALTH SYSTEM

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196933

Amount of Each Receipt this Period

215.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN P. FARRELL

Mailing Address 18889 BRASILIA DR

City

PORTER RANCH

State

CA

Zip Code

91326-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CALIFORNIA

Occupation

JUDGE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14180771

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN P. FARRELL

Mailing Address 18889 BRASILIA DR

City

PORTER RANCH

State

CA

Zip Code

91326-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CALIFORNIA

Occupation

JUDGE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208232

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

415.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RONALD E. FARRELL

Mailing Address 855 CANYON VIEW DR

City

LAGUNA BEACH

State

CA

Zip Code

92651-2610

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMPASS INTERNATIONAL

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192868

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BUFORD L. FARRINGTON

Mailing Address 4600 NE PARK SPRINGS CT

City

LEES SUMMIT

State

MO

Zip Code

64064-1775

FEC ID number of contributing
federal political committee.

C

Name of Employer
HFM PC

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193213

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WILBER FAST

Mailing Address 3100 ZINNIA CT

City

GOLDEN

State

CO

Zip Code

80401-1654

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184586

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. JOHN R. FEARON

Mailing Address 2859 TOWNSHIP RD. 179

City

BELLEFONTAINE

State

OH

Zip Code

43311-9465

FEC ID number of contributing
federal political committee.

C

Name of Employer
INDEPENDENT CONTRACTOR

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199401

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN A. FEHSENFELD

Mailing Address P.O. BOX 35200

City

LAS VEGAS

State

NV

Zip Code

89133-5200

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199413

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN A. FEHSENFELD

Mailing Address P.O. BOX 35200

City

LAS VEGAS

State

NV

Zip Code

89133-5200

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14221969

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN A. FEHSENFELD

Mailing Address P.O. BOX 35200

City

LAS VEGAS

State

NV

Zip Code

89133-5200

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14225258

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARC FEIN

Mailing Address 407 MEADOWBROOK AVENUE

City

SAINT DAVIDS

State

PA

Zip Code

19087-4831

FEC ID number of contributing
federal political committee.

C

Name of Employer
VERSUS

Occupation
EVP, PROGRAMMING & BUSINESS OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194219

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. VERA M. FERNAU

Mailing Address 112 MALLARD DR.

City

ARANSAS PASS

State

TX

Zip Code

78336-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192394

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES E. FERRELL

Mailing Address 444 W. 47TH STREET
SUITE 415

City	State	Zip Code
KANSAS CITY	MO	64112-1927

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14198348

Amount of Each Receipt this Period

30800.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARVIN S. FERTEL

Mailing Address 1213 PINE HILL RD51

City	State	Zip Code
MCLEAN	VA	22101-2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14189711

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID E. FIDDYMENT

Mailing Address P.O. BOX 245

City	State	Zip Code
LINCOLN	CA	95648-0245

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

FARMER

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14198269

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

36050.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KEN FIEDLER

Mailing Address 2201 6TH AVE SE

City

ABERDEEN

State

SD

Zip Code

57401

FEC ID number of contributing
federal political committee.

C

Name of Employer
KEN'S SUPERMARKET INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Transaction ID: SA11.14213404

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JACK M. FIELDS, JR.

Mailing Address 8 DEER RIDGE ESTATES BOULEVARD

City

KINGWOOD

State

TX

Zip Code

77339-3503

FEC ID number of contributing
federal political committee.

C

Name of Employer
TWENTY-FIRST CENTURY GROUP

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194224

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MISSY FIELDS

Mailing Address 2208 ANDERSON DR.

City

RALEIGH

State

NC

Zip Code

27608-1402

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

TRADE SHOW PROMOTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14178784

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HARTSON FILLMORE

Mailing Address 2712 MANORWOOD TRL

City

FORT WORTH

State

TX

Zip Code

76109-9589

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14193880

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. DONNA FINDLAY

Mailing Address 1 ANTHEM POINTE CT

City

HENDERSON

State

NV

Zip Code

89052-6605

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179950

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES C. FINE

Mailing Address 7608 N 127TH EAST AVE

City

OWASSO

State

OK

Zip Code

74055-7943

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195513

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RODERIC R. FINK

Mailing Address 7107 EAGLE TER.

City

WEST PALM BCH

State

FL

Zip Code

33412-3101

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178339

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. CAROLYN FISH

Mailing Address 19561 POMPAO LN

City

HUNTINGTON BEACH

State

CA

Zip Code

92648-6405

FEC ID number of contributing
federal political committee.

C

Name of Employer
FARMERS AND MERCHANT BANK

Occupation
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14200992

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JEFFREY W. FITZWILLIAM

Mailing Address 7297 ROYALGREEN DR.

City

CINCINNATI

State

OH

Zip Code

45244-3650

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194901

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHRIS FLAGET

Mailing Address PO BOX 264

City

HALLIDAY

State

ND

Zip Code

58636-0264

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177666

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HARRY FLEMING

Mailing Address 1202 W MESQUITE P.O. BOX 236

City

FULTON

State

TX

Zip Code

78358

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179723

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HARRY FLEMING

Mailing Address 1202 W MESQUITE P.O. BOX 236

City

FULTON

State

TX

Zip Code

78358

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14216337

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN J. FLEPS

Mailing Address 134 SAM BASS RIDGE ROAD

City

SOUTHLAKE

State

TX

Zip Code

76092-7886

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF RAILWAY

Occupation

RAILROAD EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202365

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. NANCY FLETCHER

Mailing Address 4125 PARKGLEN COURT NW

City

WASHINGTON

State

DC

Zip Code

20007-2137

FEC ID number of contributing
federal political committee.

C

Name of Employer
OUTDOOR ADVERTISING ASSOC-
IATION OF AME

Occupation

PRESIDENT AND C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198325

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ERNEST K. FLOEGEL

Mailing Address 39 FRANCES DR

City

HOPEWELL JUNCTION

State

NY

Zip Code

12533-5343

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185946

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN FLOR

Mailing Address 602 PLEASURE ST.

City

CHETEK

State

WI

Zip Code

54728-4110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SIX LAKES REALTY

Occupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175833

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES H. FLOURNOY

Mailing Address 7 RAINS WAY

City

HOUSTON

State

TX

Zip Code

77007-7097

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHN L. WORTHAM & SON, L.-
P.

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14229221

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BARBARA L. FODOR

Mailing Address 2280 CENTURY HL

City

LOS ANGELES

State

CA

Zip Code

90067-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219741

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID P. FOLKS

Mailing Address P.O. BOX 3430

City

EDMOND

State

OK

Zip Code

73083-3430

FEC ID number of contributing
federal political committee.

C

Name of Employer
DALE W. FOLKS INC.Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14226095

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ANDREW E. FORBES

Mailing Address 2426 39TH PLACE NW

City

WASHINGTON

State

DC

Zip Code

20007-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer
CASSIDY & ASSOCIATESOccupation
SENIOR ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180441

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARY L. FORMATO

Mailing Address 77 7TH AVENUE APT 21C

City

NEW YORK

State

NY

Zip Code

10011-6644

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188213

Amount of Each Receipt this Period

105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

805.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DONALD D. FORSHT

Mailing Address 1240 NW 74TH ST

City

MIAMI

State

FL

Zip Code

33147-6428

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEOURE-ACE OF FLORIDA

Occupation

EXECUTIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192820

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM P. FORTIER

Mailing Address 10055 SW 65TH TER

City

OCALA

State

FL

Zip Code

34476-9366

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14216412

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BEVERLY A. FOX

Mailing Address 7207 HIGHWAY 309

City

OZARK

State

AR

Zip Code

72949-8154

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW PROSPECT CONSUL.

Occupation

CONSULTANT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189322

Amount of Each Receipt this Period

175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GREGORY FOX

Mailing Address 13580 WILLIAMS ROAD

City

AZLE

State

TX

Zip Code

76020-5746

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF

Occupation

RAILROAD OPERATIONS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197672

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LAWRENCE A. FRAMBURG

Mailing Address 1555 N ASTOR ST. APT. 33E

City

CHICAGO

State

IL

Zip Code

60610-5775

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186305

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JANELLE FRANCIS

Mailing Address PO BOX 19889

City

HOUSTON

State

TX

Zip Code

77224-9889

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OIL PRODUCER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211696

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ANGIE B. FRANKENTHAL

Mailing Address 1550 NW BUTTONBUSH CIR

City

PALM CITY

State

FL

Zip Code

34990-8082

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190093

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JEFF S. FRASE

Mailing Address 21 BYFIELD LN.

City

GREENWICH

State

CT

Zip Code

06830-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224764

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RONALD A. FRASER

Mailing Address 2003 CHEROKEE RD.

City

CARPENTERSVLE

State

IL

Zip Code

60110-1263

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188233

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM FRAZIER

Mailing Address P.O. BOX 55

City

ROSSVILLE

State

TN

Zip Code

38066-0055

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192774

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ANDREW R. FREEMAN

Mailing Address 4600 CHEVY CHASE BLVD.

City

CHEVY CHASE

State

MD

Zip Code

20815-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222596

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CHARLES A. FREY

Mailing Address P.O. BOX 84

City

ANGLETON

State

TX

Zip Code

77516-0084

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205169

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GERALD FRIEDMAN

Mailing Address 260 W BEACH AVE.

City

INGLEWOOD

State

CA

Zip Code

90302-2903

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARVIN LAND SYSTEMSOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	1	1

Transaction ID: SA11.14194169

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. NEIL R. FRIEDMAN

Mailing Address 4711 GOLF RD
STE 910

City

SKOKIE

State

IL

Zip Code

60076-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	1	1

Transaction ID: SA11.14177665

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DORIS A. FRITCHER

Mailing Address 164 SCOTT STREET

City

STORM LAKE

State

IA

Zip Code

50588-7712

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	1	/	2	0	1	1

Transaction ID: SA11.14213402

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5400.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JEANETTE FROELICH

Mailing Address 220 PAISANO DR.

City

VICTORIA

State

TX

Zip Code

77904-3790

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188480

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. DAVID J. FROLICH

Mailing Address P.O. BOX 28590

City

MACON

State

GA

Zip Code

31221-8590

FEC ID number of contributing
federal political committee.

C

Name of Employer
RADIOLOGY ASSOC. OF MACONOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Transaction ID: SA11.14222593

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CHRIS FULDNER

Mailing Address 6198 LAWRENCE 2240

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190279

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ANNIE FULMER

Mailing Address 123 REEDY FORK RD

City

AIKEN

State

SC

Zip Code

29805-8759

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184733

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BERNARD G. FULTZ

Mailing Address 10360 COUNTY HIGHWAY 20

City

TRACY

State

MN

Zip Code

56175-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200772

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JARROD GABBARD

Mailing Address 207 FOREST TRAIL

City

NICHOLASVILLE

State

KY

Zip Code

40356-9151

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198329

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2725.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LANA M. GABBARD

Mailing Address 216 GATEFIELD DR

City

WILMINGTON

State

NC

Zip Code

28412-0981

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198888

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. PHYLLIS GABBARD

Mailing Address 207 FOREST TRAIL

City

NICHOLASVILLE

State

KY

Zip Code

40356-9151

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198328

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. GALA G. GABINSKY

Mailing Address 22 COLERIDGE ST

City

BROOKLYN

State

NY

Zip Code

11235-4106

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERRILL LYNCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VICE PRESIDENT

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197765

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2960.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GREG GALLI

Mailing Address 3001 RANCHO VISTA BOULEVARD

City

PALMDALE

State

CA

Zip Code

93551-4820

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUBURBAN REALTY

Occupation

REAL ESTATE BROKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202373

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DAVID GANZ

Mailing Address 77 WELLESLEY RD.

City

BELMONT

State

MA

Zip Code

02478-2123

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185955

Amount of Each Receipt this Period

220.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ERNEST J. GARCIA

Mailing Address 108 ADAM ST

City

CENTER

State

TX

Zip Code

75935-6321

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARMSTRONG HARDWOOD FLOORS

Occupation

MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180155

Amount of Each Receipt this Period

205.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

925.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LOIS F. GARDNER

Mailing Address 1905B LYDIA CT.

City

URBANA

State

IL

Zip Code

61802-9424

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185071

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS A. GARDNER

Mailing Address 513 CLARK ST

City

NEENAH

State

WI

Zip Code

54956-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer
GARDNER SYSTEMS CORP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ENGINEER

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199712

Amount of Each Receipt this Period

700.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. GARNER, SR.

Mailing Address 6445 HIGHWAY 39

City

BRAITHWAITE

State

LA

Zip Code

70040-2153

FEC ID number of contributing
federal political committee.

C

Name of Employer
IJN, INC.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INSURANCE

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191520

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

910.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. GARNER, SR.

Mailing Address 6445 HIGHWAY 39

City

BRAITHWAITE

State

LA

Zip Code

70040-2153

FEC ID number of contributing
federal political committee.

C

Name of Employer
IJN, INC.

Occupation

INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14210064

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ELISABETH W. GARRISON

Mailing Address 6300 CARMEL FALLS CT

City

MCKINNEY

State

TX

Zip Code

75070-8768

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190753

Amount of Each Receipt this Period

420.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARGE GARVEY

Mailing Address 56 TOKALON PL

City

METAIRIE

State

LA

Zip Code

70001-3020

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRUDENTIAL GARDNER REALTO-
RS

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 1 1

Transaction ID: SA11.14177631

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

980.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. BRIAN GASTON

Mailing Address 919 BERNARD STREET

City

ALEXANDRIA

State

VA

Zip Code

22314-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE GLOVER PARK GROUP

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	1	1

Transaction ID: SA11.14189702

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EDGAR M. GAY

Mailing Address 501 GREEN ACRES DR SW

City

HARTSELLE

State

AL

Zip Code

35640-3846

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Transaction ID: SA11.14190135

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDGAR M. GAY

Mailing Address 501 GREEN ACRES DR SW

City

HARTSELLE

State

AL

Zip Code

35640-3846

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.14205800

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1065.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 199 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. EDGAR M. GAY

Mailing Address 501 GREEN ACRES DR SW

City

HARTSELLE

State

AL

Zip Code

35640-3846

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217482

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL GAYNIER

Mailing Address 433 SAINT MARYS AVE.

City

MONROE

State

MI

Zip Code

48162-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPARTAN INSURANCE

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175549

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. NICHOLAS C. GEALE

Mailing Address 1707 S OAKLAND ST

City

ARLINGTON

State

VA

Zip Code

22204-5035

FEC ID number of contributing
federal political committee.

C

Name of Employer
US SENATE

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191737

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. J. WALTER GEARHART

Mailing Address PO BOX 427

City

WATERVILLE

State

WA

Zip Code

98858-0427

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14175489

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ARLAND W. GEISZLER

Mailing Address 1209 UNIQUE DR.

City

RUGBY

State

ND

Zip Code

58368-2517

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180016

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CARSON GENTRY, SR.

Mailing Address 1906 LOIRE VALLEY RD.

City

JOHNSON CITY

State

TN

Zip Code

37604-7632

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14218688

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

720.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. BRUCE F. GEORGE

Mailing Address 166 NW ANTELOPE LOOP

City

LAKE CITY

State

FL

Zip Code

32055-1138

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190696

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS D. GEORGE

Mailing Address 5035 E LAKE COUNTRY RD.

City

FLAGSTAFF

State

AZ

Zip Code

86004-7835

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192558

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KEN W. GEPHART

Mailing Address 1906 BRYN MAWR DR NE
APT. 331

City

ALBUQUERQUE

State

NM

Zip Code

87106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212230

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

760.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JACK GERARD

Mailing Address 7020 BENJAMIN STREET

City

MCLEAN

State

VA

Zip Code

22101-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN PETROLEUM INSTIT-
UTE

Occupation

PRESIDENT AND C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194213

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANCIS R. GERMAIN

Mailing Address 8 WYNDBROOK LANE

City

TYNGSBORO

State

MA

Zip Code

01879-2551

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14201237

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM C. GERMANN

Mailing Address 14000 E 263RD ST

City

PECULIAR

State

MO

Zip Code

64078-8417

FEC ID number of contributing
federal political committee.

C

Name of Employer
RAY PACK

Occupation

MAINTENANCE MAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14187085

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARY E. GERSH

Mailing Address 7428 WILSON TER

City

MORTON GROVE

State

IL

Zip Code

60053-1171

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202202

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. SAKINEH GHORBANIAN

Mailing Address 100 EVANS RD

City

BUTLER

State

PA

Zip Code

16001-1970

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PHYSICIAN

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14197966

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. LEE A. GIBBONS

Mailing Address 9759 IL. ROUTE 125

City

BEARDSTOWN

State

IL

Zip Code

62618-7877

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

HOMEMAKER

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188377

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER M. GIBLIN

Mailing Address 1304 CHANCEL PLACE

City

ALEXANDRIA

State

VA

Zip Code

22314-4707

FEC ID number of contributing
federal political committee.

C

Name of Employer
OGILVY GOVT. RELATIONS

Occupation

GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202366

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVE GIBSON

Mailing Address 305 CARTEE ST

City

COUDERSPORT

State

PA

Zip Code

16915-1445

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14195394

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JESSE W. GIEGER

Mailing Address 316 MITCHELL RD

City

COLLINS

State

MS

Zip Code

39428-7234

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207343

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARTHA P. GIESE

Mailing Address 20 FRAMINGHAM LANE

City

PITTSFORD

State

NY

Zip Code

14534-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188045

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SLOAN R. GILL

Mailing Address 29129 FOUNTAINWOOD ST.

City

AGOURA HILLS

State

CA

Zip Code

91301-1664

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197435

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LUTHER R. GILLIAM

Mailing Address 36 FOXTAIL DR.

City

PORT DEPOSIT

State

MD

Zip Code

21904-2108

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186820

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MARK E. GILLIAM

Mailing Address 400 TRAVIS ST.

City

SHREVEPORT

State

LA

Zip Code

71101-3108

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14208302

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARY E. GILLUM

Mailing Address 112 HERITAGE LN

City

DENTON

State

TX

Zip Code

76209-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14185187

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARY E. GILLUM

Mailing Address 112 HERITAGE LN

City

DENTON

State

TX

Zip Code

76209-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Transaction ID: SA11.14212191

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOSEPHINE I. GILMORE

Mailing Address 1600 MORGANTON RD. LOT D11

City

PINEHURST

State

NC

Zip Code

28374-6842

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185097

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN H. GIVAN

Mailing Address 1200 38TH. ST. APT. 30

City

BAKERSFIELD

State

CA

Zip Code

93301-1362

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192601

Amount of Each Receipt this Period

240.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

EARL GJELDE

Mailing Address 790 ROSE ACRES CT

City

LOVELAND

State

CO

Zip Code

80537-9376

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPGI

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 1 1

Transaction ID: SA11.14213690

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

940.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD H. GLANTZ

Mailing Address 5351 SE BURNING TREE CIR

City

STUART

State

FL

Zip Code

34997-8034

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179685

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD H. GLANTZ

Mailing Address 5351 SE BURNING TREE CIR

City

STUART

State

FL

Zip Code

34997-8034

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200455

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. GUILLERMO GODOY

Mailing Address 1364 DOWNING RDG

City

TUSCALOOSA

State

AL

Zip Code

35406-3642

FEC ID number of contributing
federal political committee.

C

Name of Employer
TUSCALOOSA NEWBORN MEDICI-
NE

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197720

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. JEANNE GODWIN

Mailing Address 3109 GRAND AVE #345

City

MIAMI

State

FL

Zip Code

33133-5103

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202340

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JACOBO GOLDBERG

Mailing Address 63 BRIAR HOLLOW LN

City

BELLAIRE

State

TX

Zip Code

77401

FEC ID number of contributing
federal political committee.

C

Name of Employer
PODIATRICS OF SOUTHWEST
HOUSTON

Occupation

PHYSICIAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14191784

Amount of Each Receipt this Period

430.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES GOODING

Mailing Address 600 WAITES CORNER RD

City

WEST KINGSTON

State

RI

Zip Code

02892-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW ENGLAND TURF INC

Occupation

OWNER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14207260

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1730.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ULYSSES V. GOODWYN

Mailing Address 508 CARNOUSTIE

City

SHOAL CREEK

State

AL

Zip Code

35242-5956

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202416

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. PRISCILLA A. GOODYEAR

Mailing Address 10042 SIGNET CIR.

City

HUNTINGTN BCH

State

CA

Zip Code

92646-6631

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOMBARDI REALTY

Occupation
R. E. SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14219992

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JENNIE GORDON

Mailing Address 779 US HIGHWAY 16 E

City

BUFFALO

State

WY

Zip Code

82834-9514

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RANCHER / ENVIRONMENTALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209932

Amount of Each Receipt this Period

800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JACOBUS GORTER

Mailing Address 14328 CHENAL PARKWAY #25

City

LITTLE ROCK

State

AR

Zip Code

72211-5837

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185234

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JACOBUS GORTER

Mailing Address 14328 CHENAL PARKWAY #25

City

LITTLE ROCK

State

AR

Zip Code

72211-5837

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192236

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SUSAN GOTTLIEB

Mailing Address 1356 LAUREL WAY

City

BEVERLY HILLS

State

CA

Zip Code

90210-2245

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219782

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DONALD G. GOURLEY

Mailing Address P.O. BOX 1456

City

PRINEVILLE

State

OR

Zip Code

97754-0757

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184219

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT P. GOWING

Mailing Address 619 TOYOPA DR.

City

PACIFIC PLSDS

State

CA

Zip Code

90272-4472

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220041

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PETER J. GRACE

Mailing Address 5709 SEASHORE DRIVE

City

NEWPORT BEACH

State

CA

Zip Code

92663-2223

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229241

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA M. GRAHAM

Mailing Address P.O. BOX 524

City

FRANKLIN

State

NC

Zip Code

28744-0524

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2635.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180011

Amount of Each Receipt this Period

710.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT K. GRAHAM

Mailing Address 1740 DREXEL LAKE DR

City

COLUMBIA

State

SC

Zip Code

29223-3918

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193765

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT K. GRAHAM

Mailing Address 1740 DREXEL LAKE DR

City

COLUMBIA

State

SC

Zip Code

29223-3918

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195927

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

770.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT K. GRAHAM

Mailing Address 1740 DREXEL LAKE DR

City

COLUMBIA

State

SC

Zip Code

29223-3918

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208055

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JARROD GRASSO

Mailing Address 23 FIELD STREET

City

TOMS RIVER

State

NJ

Zip Code

08753-6623

FEC ID number of contributing
federal political committee.

C

Name of Employer
NJ ASSOCIATION OF REALTORS

Occupation
EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175798

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

EILEEN GREALLY

Mailing Address 142 E 27TH. ST. APT. 4D

City

NEW YORK

State

NY

Zip Code

10016-9057

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7.50

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14227170

Amount of Each Receipt this Period

-742.50

CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional)

-182.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. NINA J. GREGORY

Mailing Address 14615 NATALIE DR

City

WHITTIER

State

CA

Zip Code

90604-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175534

Amount of Each Receipt this Period

375.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. NINA J. GREGORY

Mailing Address 14615 NATALIE DR

City

WHITTIER

State

CA

Zip Code

90604-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194368

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD M. GREGORY

Mailing Address 618 JUPITER DR. UNIT 1013

City

MADISON

State

WI

Zip Code

53718-2985

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219218

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1025.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD S. GRIFFITH

Mailing Address 3417 MILAM ST

City

HOUSTON

State

TX

Zip Code

77002-9531

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

INVESTOR/HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14225134

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD R. GRIGG

Mailing Address 4140 FAR O WAY LN

City

RICHFIELD

State

OH

Zip Code

44286-9491

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14214605

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM A. GRIMES

Mailing Address P.O. BOX 183

City

LYONS

State

OR

Zip Code

97358-0183

FEC ID number of contributing
federal political committee.**C**Name of Employer
LYONS -MEHHMA WATER DTS

Occupation

SEPT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188865

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS GRIMM

Mailing Address 1757 E CLIFTON ROAD NE

City

ATLANTA

State

GA

Zip Code

30307-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14224321

Amount of Each Receipt this Period

420.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK L. GRUSS

Mailing Address 26820 EDGEWOOD ROAD

City

EXCELSIOR

State

MN

Zip Code

55331-8344

FEC ID number of contributing
federal political committee.

C

Name of Employer
FREEMONT INDUSTRIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PRESIDENT

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Transaction ID: SA11.14231509

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT GUEST

Mailing Address 945 RED BLUFF RANCH DR

City

PIPE CREEK

State

TX

Zip Code

78063-6112

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14193936

Amount of Each Receipt this Period

175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10595.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. E. R. GUILLIAMS

Mailing Address 55622 TOWNSHIP ROAD 169

City

FRESNO

State

OH

Zip Code

43824-9708

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179938

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROY M. GUINN

Mailing Address 12526 MIDLAND CREEK DR

City

TOMBALL

State

TX

Zip Code

77377-8213

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ENGINEER

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188438

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JEFFREY GULCHER

Mailing Address 25663 N COUNTRYSIDE DR

City

BARRINGTON

State

IL

Zip Code

60010-7029

FEC ID number of contributing
federal political committee.

C

Name of Employer
DECODE GENETICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

BIO TECH

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179992

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

670.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARY J. GULINO

Mailing Address 4200 OLD COLUMBIA PIKE

City

ANNANDALE

State

VA

Zip Code

22003-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195645

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JERRY C. GULLION

Mailing Address 217 DOLORES DR

City

MARSHALL

State

TX

Zip Code

75672-1399

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188476

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

D. GUMPERTZ

Mailing Address P.O. BOX 2450

City

TOLUCA LAKE

State

CA

Zip Code

91610-0450

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14189948

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 220 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MADELINE GUSSMAN

Mailing Address 909 N. WHITIER DRIVE

City

BEVERLY HILLS

State

CA

Zip Code

90210-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194179

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MAGNUS GUSTAFSSON

Mailing Address 253 PUTNAM RD

City

NEW CANAAN

State

CT

Zip Code

06840-6812

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CONSULTANT

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190219

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARTHA R. HAAS

Mailing Address 5000 SW 83RD ST.

City

MIAMI

State

FL

Zip Code

33143-8510

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

HOMEMAKER

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193210

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN C. HADDON

Mailing Address 5 BEL TOR DR.

City

STROUDSBURG

State

PA

Zip Code

18360-9002

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203740

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD HAERR

Mailing Address 6170 MIDDLE URBANA RD

City

SPRINGFIELD

State

OH

Zip Code

45502-9289

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191804

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

W. S. HAINES

Mailing Address 39 BRIARWOOD DR.

City

WHEELING

State

WV

Zip Code

26003-4835

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190873

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

W. S. HAINES

Mailing Address 39 BRIARWOOD DR.

City

WHEELING

State

WV

Zip Code

26003-4835

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192819

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LARRY HALE

Mailing Address 520 LUNALILO HOME RD UNIT 5410

City

HONOLULU

State

HI

Zip Code

96825-1726

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200498

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LUKE HALINSKI

Mailing Address 101 HEDGEROW WAY

City

LANSDALE

State

PA

Zip Code

19446-5071

FEC ID number of contributing
federal political committee.

C

Name of Employer
VOLUNTEER

Occupation
VOLUNTEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223300

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 223 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. JEANNEANE HALL

Mailing Address 14 N SAINT JAMES PL

City

EASTBOROUGH

State

KS

Zip Code

67206-2027

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212862

Amount of Each Receipt this Period

220.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOE HALL

Mailing Address 433 FENTON PL

City

CHARLOTTE

State

NC

Zip Code

28207-1917

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAT BOY TRADING

Occupation

ADMINISTRATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199794

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM M. HALLAGER

Mailing Address 113 POLLARD RD

City

LINCOLN

State

NH

Zip Code

03251-4236

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210821

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

720.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 224 / 760
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**A.**

Full Name (Last, First, Middle Initial)

MR. JOHN OSCAR HALLQUIST

Mailing Address 3737 CROSS RD.

City

LIVERMORE

State

CA

Zip Code

94550-9756

FEC ID number of contributing
federal political committee.**C**Name of Employer
LSTC

Occupation

MECHANICAL ENG

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14225222

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WAYNE HALSTEAD

Mailing Address CMR 420 BOX 1419

City

APO

State

AE

Zip Code

09063-0015

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14181925

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WAYNE HALSTEAD

Mailing Address CMR 420 BOX 1419

City

APO

State

AE

Zip Code

09063-0015

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14198963

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GREGORY J. HAMER, SR.

Mailing Address P.O. BOX 3608

City

MORGAN CITY

State

LA

Zip Code

70381-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
BIG FOOD ENTERPRISES LLCOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14199405

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SHERRY C. HAMILTON

Mailing Address 211 N CHURCH ST
P.O. BOX 488

City

GROVE HILL

State

AL

Zip Code

36451-3137

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14184736

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HOWARD F. HAMMACK

Mailing Address 2122 GOLDEN EAGLE DR. W

City

TALLAHASSEE

State

FL

Zip Code

32312-4036

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14197110

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1335.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HOWARD F. HAMMACK

Mailing Address 2122 GOLDEN EAGLE DR. W

City

TALLAHASSEE

State

FL

Zip Code

32312-4036

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206683

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CRAIG W. HAMMOND

Mailing Address 1005 NW 16TH ST.

City

LAWTON

State

OK

Zip Code

73507-5105

FEC ID number of contributing
federal political committee.

C

Name of Employer
CGI FEDERAL

Occupation
SYSTEM ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198079

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILTON N. HAMMOND

Mailing Address 3805 CRESTWOOD TER.
410

City

FORT WORTH

State

TX

Zip Code

76107-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210816

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. SUZANNE E. HANAS

Mailing Address 1300 CRYSTAL DR
APT 309

City State Zip Code
ARLINGTON VA 22202-3234

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
NURSE/RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14187063

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MICHAEL HANNAH

Mailing Address 3320 E KIRKWOOD AVE

City State Zip Code
ORANGE CA 92869-5211

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194356

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TONY HANNOLD

Mailing Address P.O. BOX 176

City State Zip Code
MATHEWS VA 23109-0176

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175508

Amount of Each Receipt this Period

155.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

405.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. LISA J. HANSARD

Mailing Address 6500 N MO PAC EXPY
I-1200

City State Zip Code
AUSTIN TX 78731-3283

FEC ID number of contributing
federal political committee.

C

Name of Employer
TEXAS FERTILITY CENTER

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213720

Amount of Each Receipt this Period

750.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EUGENE HANSEN

Mailing Address 1607 YALECREST AVE

City State Zip Code
SALT LAKE CITY UT 84105-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14168221

Amount of Each Receipt this Period

-510.00

CONTRIBUTION

CHARGED BACK

C.

Full Name (Last, First, Middle Initial)

LYNETTE A. HANSON-JACQUES

Mailing Address 342 WEKIU PL

City State Zip Code
LAHAINA HI 96761-2914

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223302

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH A. HARDY, III

Mailing Address ROUTE 519
P.O. BOX 584City State Zip Code
EIGHTY FOUR PA 15384FEC ID number of contributing
federal political committee.

C

Name of Employer
84 LUMBER CO.Occupation
CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14189747

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD B. HARDY

Mailing Address 41 MCGREGORY RD

City State Zip Code
STURBRIDGE MA 01566-1526FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14199372

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES NEIL HARGER

Mailing Address 1420 6TH STREET

City State Zip Code
MANHATTAN BEACH CA 90266-6344FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Transaction ID: SA11.14229240

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

17700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. DOROTHY HARKNESS

Mailing Address 925 IRVING DR.

City

BURBANK

State

CA

Zip Code

91504-1836

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190760

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. CHARLENE C. HARRIS

Mailing Address 6 TRAP PL

City

SHELDON

State

SC

Zip Code

29941-3068

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179997

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EDWARD M. HARRIS

Mailing Address 319 VALLEY DR APT 311

City

SOUTH BOSTON

State

VA

Zip Code

24592-4825

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14207799

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

860.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. FRANCES M. HARRIS

Mailing Address 2714 KNOLLRIDGE DR

City

SIERRA VISTA

State

AZ

Zip Code

85650-5718

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195986

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. FRANCES M. HARRIS

Mailing Address 2714 KNOLLRIDGE DR

City

SIERRA VISTA

State

AZ

Zip Code

85650-5718

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221534

Amount of Each Receipt this Period

320.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JOAN C. HARRISON

Mailing Address 4021 OLD LEEDS RDG

City

BIRMINGHAM

State

AL

Zip Code

35213-3227

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179263

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

730.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. PATRICIA HARRIS

Mailing Address 134 COLUMNS CIRCLE

City

SHELBY

State

NC

Zip Code

28150-4866

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188394

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. PATRICIA HARRIS

Mailing Address 134 COLUMNS CIRCLE

City

SHELBY

State

NC

Zip Code

28150-4866

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189114

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD J. HARRINGTON

Mailing Address 9 GREYSTONE FARM LN

City

WESTPORT

State

CT

Zip Code

06880-2750

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190976

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

255.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WILLIAM D. HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City

BLOOMFIELD

State

CT

Zip Code

06002-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14187926

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

WILLIAM D. HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City

BLOOMFIELD

State

CT

Zip Code

06002-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14187927

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WILLIAM D. HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City

BLOOMFIELD

State

CT

Zip Code

06002-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196600

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WILLIAM D. HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City

BLOOMFIELD

State

CT

Zip Code

06002-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208234

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

WILLIAM D. HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City

BLOOMFIELD

State

CT

Zip Code

06002-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210820

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WILLIAM D. HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City

BLOOMFIELD

State

CT

Zip Code

06002-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214853

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WILLIAM D. HARSHBARGER

Mailing Address 10 LOEFFLER RD.

City

BLOOMFIELD

State

CT

Zip Code

06002-2256

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223503

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LARRY J. HART

Mailing Address 17631 BRIDGEWAY CIRCLE

City

CHESTERFIELD

State

MO

Zip Code

63005-4219

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197240

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID A. HARTMAN

Mailing Address 10711 BURNET ROAD
STE. 330

City

AUSTIN

State

TX

Zip Code

78758-4465

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARTMAN & ASSOCIATES INC.

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14221326

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CLARENCE F. HARTWIG

Mailing Address 219 MUIRFIELD CT.

City

NORTH PRAIRIE

State

WI

Zip Code

53153-9617

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14208476

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ANDREW T. HARVEY

Mailing Address 71 W BERRY WAY

City

QUEENSBURY

State

NY

Zip Code

12804-9407

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180055

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. NANCY W. HASELHORST

Mailing Address 6205 MINERAL POINT RD
APT. 810

City

MADISON

State

WI

Zip Code

53705-4581

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14184355

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

W. C. HATCHER

Mailing Address 3747 PEACHTREE RD NE APT 1523

City

ATLANTA

State

GA

Zip Code

30319-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Transaction ID: SA11.14211848

Amount of Each Receipt this Period

135.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM A. HAUG

Mailing Address 1577 CASTLEBURY DR

City

BATON ROUGE

State

LA

Zip Code

70815-6713

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
CHEMICAL ENG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14205764

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. SYLVIA S. HAUZENBLAS

Mailing Address P.O. BOX 38

City

BRYANT POND

State

ME

Zip Code

04219-0038

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194363

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. LEO J. HAVILAN

Mailing Address 6 LAKE HELIX DR.

City

LA MESA

State

CA

Zip Code

91941-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193505

Amount of Each Receipt this Period

800.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MAGALENE L. HAWKINS

Mailing Address 229 BENDELOW COURT

City

DELAWARE

State

OH

Zip Code

43015-1378

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197809

Amount of Each Receipt this Period

95.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MAGALENE L. HAWKINS

Mailing Address 229 BENDELOW COURT

City

DELAWARE

State

OH

Zip Code

43015-1378

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198384

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

945.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM R. HAWTHORNE

Mailing Address 4878 ROUTE 322

City

BROOKVILLE

State

PA

Zip Code

15825-2700

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194336

Amount of Each Receipt this Period

85.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. VIRGIL L. HAYDEN

Mailing Address 5207 JEANETTE LN

City

TAHLEQUAH

State

OK

Zip Code

74464-8090

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205751

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. CAROL J. HAYES

Mailing Address 1904 COUNTY RD 124

City

CHESAPEAKE

State

OH

Zip Code

45619-7847

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184987

Amount of Each Receipt this Period

220.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

605.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LYNN HAYES

Mailing Address 3427 OAK HILL ST.

City

SIERRA VISTA

State

AZ

Zip Code

85650-5146

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14187715

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. TALMADGE V. HAYS, M.D.

Mailing Address 121 E VIRGINIA AVE
STE 100

City

PINEVILLE

State

KY

Zip Code

40977

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14206686

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

THOMAS M. HAYTHE

Mailing Address 11 LAMBOLL ST.

City

CHARLESTON

State

SC

Zip Code

29401-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14218533

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HON. NAN HAYWORTH

Mailing Address 214 MCLAIN STREET

City

MOUNT KISCO

State

NY

Zip Code

10549-4931

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNITED STATES CONGRESS

Occupation

MEMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211786

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

FRANCES H. HEAR

Mailing Address 10825 TIMBER SPRINGS DR

City

FISHERS

State

IN

Zip Code

46038-2243

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217398

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

VINCENT J. HEARING

Mailing Address 407 RUSSELL AVE APT 508

City

GAITHERSBURG

State

MD

Zip Code

20877-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186831

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 242 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MARY HEARTY

Mailing Address 2020 STOCKBRIDGE RD

City

AKRON

State

OH

Zip Code

44313-4541

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209816

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MERLE L. HECKMAN

Mailing Address 1415 TOWNE SQUARE BLVD NW

City

ROANOKE

State

VA

Zip Code

24012-1611

FEC ID number of contributing
federal political committee.

C

Name of Employer
DAVID JAMES HOMES

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14216066

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARGARET B. HEERS

Mailing Address 5545 N FRESNO ST APT 210

City

FRESNO

State

CA

Zip Code

93710-6169

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185123

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MILDRED C. HEIDENBERGER

Mailing Address 8660 E HOLLAND RD

City

SAGINAW

State

MI

Zip Code

48601-9474

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192855

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JEANNETTE HEIM

Mailing Address 508 BLUFF VIEW DR.

City

DUNLAP

State

TN

Zip Code

37327-6586

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192663

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. STEPHEN HEIM

Mailing Address 30W249 MAPLE TREE LN

City

WAYNE

State

IL

Zip Code

60184-2426

FEC ID number of contributing
federal political committee.

C

Name of Employer
OAD ORTHOPEDICS

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192393

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MARK V. HEITZ

Mailing Address 260 SW YORKSHIRE RD.

City

TOPEKA

State

KS

Zip Code

66606-2283

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198337

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LEWIS A. HEMBREE

Mailing Address P.O. BOX 1725

City

SHAWNEE

State

OK

Zip Code

74802-1725

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INDEPENDENT OIL PRODUCER

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200258

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CARROLL HEMPHILL

Mailing Address 955 CADARETTA RD

City

GORE SPRINGS

State

MS

Zip Code

38929-6641

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

FARMER

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190075

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARYANN A. HENDRICKSON

Mailing Address 8340 HWY 12

City

ORANGE

State

TX

Zip Code

77632-7302

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189334

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK W. HENNESSY

Mailing Address 4272 GARMON ROAD

City

ATLANTA

State

GA

Zip Code

30327-3834

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SALESMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189746

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. GEORGE D. HENNING

Mailing Address 7482 TERRAPIN TRL.

City

ROANOKE

State

VA

Zip Code

24018-5380

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROANOKE ORPUPADIC CTR

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197284

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. GEORGE D. HENNING

Mailing Address 7482 TERRAPIN TRL.

City

ROANOKE

State

VA

Zip Code

24018-5380

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROANOKE ORPUPADIC CTR

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205015

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. GEORGE D. HENNING

Mailing Address 7482 TERRAPIN TRL.

City

ROANOKE

State

VA

Zip Code

24018-5380

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROANOKE ORPUPADIC CTR

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222584

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GREGORY HERB

Mailing Address 2998 BURTON DRIVE

City

GILBERTSVILLE

State

PA

Zip Code

19525-8893

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219850

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

635.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JACK R. HERETH

Mailing Address 2269 E CHEROKEE DR.

City

WOODSTOCK

State

GA

Zip Code

30188-1941

FEC ID number of contributing
federal political committee.

C

Name of Employer
GIBSONBURG HEALTH LLC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.14198383

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HENRY L. HERNANDO

Mailing Address 870 W 8TH ST

City

SAN PEDRO

State

CA

Zip Code

90731-3019

FEC ID number of contributing
federal political committee.

C

Name of Employer
APOSTLESHIP OF THE SEA

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	1	1

Transaction ID: SA11.14183693

Amount of Each Receipt this Period

325.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DOROTHY M. HESLIP

Mailing Address 750 E MAIN ST

City

HARBOR SPGS

State

MI

Zip Code

49740-1548

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Transaction ID: SA11.14190238

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GERALD J. HESS

Mailing Address P.O. BOX 557

City

MUENSTER

State

TX

Zip Code

76252-0557

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188825

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK HICKS

Mailing Address 799 BRICKELL PLZ STE. 900

City

MIAMI

State

FL

Zip Code

33131-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer
HICKS, PORTER EBENFELD &
STEIN PA

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224455

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN T. HILEMAN

Mailing Address 1812 NIBLICK CIR

City

LAS VEGAS

State

NV

Zip Code

89142-1836

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175523

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1260.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 249 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ANN G. HILL

Mailing Address 708 CREATION DR

City

DU BOIS

State

PA

Zip Code

15801-3996

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186802

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JAMES W. HILL

Mailing Address 547 HOUSTON LANE

City

WOODBURY

State

TN

Zip Code

37190-1670

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190385

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MICHELLE L. HILL

Mailing Address 35 OLD MILITARY RD.

City

SARANAC LAKE

State

NY

Zip Code

12983-1216

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14201903

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WENDALL W. HIRSCHFELD

Mailing Address 6512 CYPRESS POINT NORTH

City

AUSTIN

State

TX

Zip Code

78746-7154

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14216153

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WENDALL W. HIRSCHFELD

Mailing Address 6512 CYPRESS POINT NORTH

City

AUSTIN

State

TX

Zip Code

78746-7154

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14216154

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LYLE HITT

Mailing Address 483 MARK RD.

City

ALLENDALE

State

NJ

Zip Code

07401-1828

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARCH INSURANCE COMP

Occupation

UNDERWRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192402

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HELEN E. HOAG

Mailing Address 7730 4TH. PL.

City

DOWNEY

State

CA

Zip Code

90241-3230

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208290

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JACK B. HOBSON, SR.

Mailing Address 926 CHEROKEE ROAD

City

CHARLOTTE

State

NC

Zip Code

28207-2242

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213323

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MARGIE L. HOFFMAN

Mailing Address 2105 ATLANTIC ST.
APT 623

City

MELBOURNE BCH

State

FL

Zip Code

32951-2460

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221660

Amount of Each Receipt this Period

211.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

821.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. FREDERICK HOHMANN

Mailing Address 30 WHITE LAKE ROAD

City

SPARTA

State

NJ

Zip Code

07871

FEC ID number of contributing
federal political committee.

C

Name of Employer

H&H PRODUCTION MACHINING
INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14183660

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SOL N. HOKE

Mailing Address 1801 BACHMANS VALLEY RD

City

WESTMINSTER

State

MD

Zip Code

21158-3206

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185175

Amount of Each Receipt this Period

115.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. SOL N. HOKE

Mailing Address 1801 BACHMANS VALLEY RD

City

WESTMINSTER

State

MD

Zip Code

21158-3206

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199344

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. SOL N. HOKE

Mailing Address 1801 BACHMANS VALLEY RD

City

WESTMINSTER

State

MD

Zip Code

21158-3206

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202768

Amount of Each Receipt this Period

70.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ELLEN T. HOLIAN

Mailing Address 8113 KEYSTONE RD.

City

RICHMOND

State

IL

Zip Code

60071-9715

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199398

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GEORGE D. HOLMES

Mailing Address 130 MARINA DR

City

BULLARD

State

TX

Zip Code

75757-9360

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209722

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. NED S. HOLMES

Mailing Address 55 WAUGH DRIVE
STE. 111

City State Zip Code
HOUSTON TX 77007-5800

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARKWAY INVESTMENTS

Occupation
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198340

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES HOLTEN

Mailing Address 4003 CHESTNUT OAK DR

City State Zip Code
SMITHTON IL 62285-3741

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOLTEN MEAT INC

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180042

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES HOLTZ

Mailing Address 13801 EAST YALE AVE APT 306

City State Zip Code
AURORA CO 80014-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220737

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM HOOPER, JR.

Mailing Address PO BOX 1692

City

CONROE

State

TX

Zip Code

77305-1692

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191763

Amount of Each Receipt this Period

450.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALBERT K. HOOVER

Mailing Address 3518 LINDENWOOD AVE

City

DALLAS

State

TX

Zip Code

75205-3230

FEC ID number of contributing
federal political committee.

C

Name of Employer
A T & T

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218424

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WILL HORSLEY

Mailing Address 14 EVERGREEN LN

City

ANDOVER

State

MA

Zip Code

01810-4411

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190152

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRANCES HORTON

Mailing Address 1178 SHEPHERDS WAY

City

GRACEVILLE

State

FL

Zip Code

32440-1911

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223630

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN HOTZ

Mailing Address 7457 440TH LANE

City

RUSHVILLE

State

NE

Zip Code

69360-5202

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200204

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER D. HOUSE

Mailing Address 3316 WINDY OAKS DRIVE

City

PACE

State

FL

Zip Code

32571-9555

FEC ID number of contributing
federal political committee.

C

Name of Employer
SARASOTA FIRE DEPT

Occupation
FIREFIGHTER/PARAMEDIC RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14216218

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GARY E. HOVERSTEN

Mailing Address 802 HIGH ST.

City

WEBSTER CITY

State

IA

Zip Code

50595-2524

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186674

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GARY E. HOVERSTEN

Mailing Address 802 HIGH ST.

City

WEBSTER CITY

State

IA

Zip Code

50595-2524

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188522

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GARY E. HOVERSTEN

Mailing Address 802 HIGH ST.

City

WEBSTER CITY

State

IA

Zip Code

50595-2524

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210805

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHARLES G. HOWARD

Mailing Address P.O. BOX 471

City

MORGANTOWN

State

KY

Zip Code

42261-0471

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14184374

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN W. HOWARD

Mailing Address 17220 MACDUFF AVE

City

OLNEY

State

MD

Zip Code

20832-2958

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEXLER AND WALKEROccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180461

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BUD HOWE

Mailing Address 15 ARDENNES PL

City

LAKE ST LOUIS

State

MO

Zip Code

63367-1633

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192190

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2755.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JAMES H. HOWE, III

Mailing Address 432 SEABREEZE AVE

City

PALM BEACH

State

FL

Zip Code

33480-4107

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188218

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. VALENTINE S. HOY

Mailing Address 2 CAMINO BARCELONA PL

City

HENDERSON

State

NV

Zip Code

89011-2406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197805

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOSEPH N. HOYT

Mailing Address 819 PEMBROKE COURT

City

VERO BEACH

State

FL

Zip Code

32963-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14187086

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JEAN G. HUBBARD

Mailing Address 2618 E DEVON ST

City

TUCSON

State

AZ

Zip Code

85716-5506

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14183990

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. R. C. HUDSON, JR.

Mailing Address 1330 EDGEWOOD LN

City

NORTHBROOK

State

IL

Zip Code

60062-4716

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CORP OFFICER

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188412

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LOUIS J. HUFFMAN

Mailing Address 616 BERKSHIRE DR.

City

STATESVILLE

State

NC

Zip Code

28677-6020

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188122

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ARTHUR W. HUGULEY, IV

Mailing Address 365 CANAL ST.
STE. 2900

City State Zip Code
NEW ORLEANS LA 70130-6522

FEC ID number of contributing
federal political committee.

C

Name of Employer
WESTWAY

Occupation
MANAGER IMPORT/EXPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198249

Amount of Each Receipt this Period

310.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. WILMA L. HULL

Mailing Address 2965 SW 53RD ST

City State Zip Code
CORVALLIS OR 97333-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197261

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES B. HUMPHREY

Mailing Address 3500 LEXINGTON AVE

City State Zip Code
DALLAS TX 75205-3915

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194526

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

670.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CYNTHIA E. HUMPHREYS

Mailing Address 1347 LAMAR SQUARE DR. APT. 201

City

AUSTIN

State

TX

Zip Code

78704-2242

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOODWILL END

Occupation

SALES CLERK

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14184925

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

CYNTHIA E. HUMPHREYS

Mailing Address 1347 LAMAR SQUARE DR. APT. 201

City

AUSTIN

State

TX

Zip Code

78704-2242

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOODWILL END

Occupation

SALES CLERK

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14205066

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CYNTHIA E. HUMPHREYS

Mailing Address 1347 LAMAR SQUARE DR. APT. 201

City

AUSTIN

State

TX

Zip Code

78704-2242

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOODWILL END

Occupation

SALES CLERK

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14224596

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS N. HUND

Mailing Address 2300 CEDAR ELM TER

City

WESTLAKE

State

TX

Zip Code

76262-9030

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF CORP.

Occupation

EXECUTIVE V.P. & C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210182

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES HUNT

Mailing Address 457 TURKEY RUN

City

FLINTSTONE

State

GA

Zip Code

30725-2768

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALGREENS

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202077

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. CLARICE HUNTER

Mailing Address 423 HALSEY ST. # 1

City

BROOKLYN

State

NY

Zip Code

11233-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182799

Amount of Each Receipt this Period

63.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1173.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. CLARICE HUNTER

Mailing Address 423 HALSEY ST. # 1

City

BROOKLYN

State

NY

Zip Code

11233-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212179

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAY HURTADO

Mailing Address 9841 BELL RANCH DR.

City

SANTA FE SPGS

State

CA

Zip Code

90670-2953

FEC ID number of contributing
federal political committee.

C

Name of Employer
HURLEN CORPORATION

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195672

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BARBARA HUSTON

Mailing Address 2008 W STOLLEY PARK RD

City

GRAND ISLAND

State

NE

Zip Code

68801-6974

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212649

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

C. E. HUTCHINS

Mailing Address 1808 KINGLET CT.

City

COSTA MESA

State

CA

Zip Code

92626-4840

FEC ID number of contributing
federal political committee.

C

Name of Employer
AUGUST PARTNERS, INC.

Occupation

C.P.A.-PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178651

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES R. HUTCHINSON

Mailing Address 8502 DACOSTA ST
P.O. BOX 567

City

DOWNEY

State

CA

Zip Code

90240-4013

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188243

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HENRY M. HUTCHESON

Mailing Address 115 S HAWK DR

City

RAINBOW CITY

State

AL

Zip Code

35906-3609

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192205

Amount of Each Receipt this Period

600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. OLIN V. HYDE

Mailing Address 212 NOTTINGHAM RD

City

RICHMOND

State

VA

Zip Code

23221-3115

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184835

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANK IANNA

Mailing Address 425 DEVONSHIRE DR.

City

FRANKLIN LKS

State

NJ

Zip Code

07417-3023

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185935

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. PAULINE INABNITT

Mailing Address 926 CAMBRIDGE DR

City

MASON

State

OH

Zip Code

45040-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184953

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. LUIGI IORI

Mailing Address 7501 E THOMPSON PEAK PKWY
UNIT 264

City State Zip Code
SCOTTSDALE AZ 85255-4534

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222485

Amount of Each Receipt this Period

350.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROSS IRWIN

Mailing Address 406 SILVERGATE AVE

City State Zip Code
SAN DIEGO CA 92106-3328

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213818

Amount of Each Receipt this Period

135.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROSS IRWIN

Mailing Address 406 SILVERGATE AVE

City State Zip Code
SAN DIEGO CA 92106-3328

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14219938

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

585.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ALFRED A. IVERSEN

Mailing Address 2216 HUNTINGTON POINT RD W

City

WAYZATA

State

MN

Zip Code

55391-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer
PMT CORP

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14207951

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ROBERTA R. JACKOMIS

Mailing Address 11621 ROLLING MEADOW DR

City

GREAT FALLS

State

VA

Zip Code

22066-1344

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14210074

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GLORIA J. JACKSON

Mailing Address 8601 N 64TH PL

City

PARADISE VLY

State

AZ

Zip Code

85253-1824

FEC ID number of contributing
federal political committee.

C

Name of Employer
CABLE AMERICA

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221407

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WR JACKSON

Mailing Address 55 BURBANK LANE

City

YARMOUTH

State

ME

Zip Code

04096-5927

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222195

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK M. JACOBS

Mailing Address P.O. BOX 3795

City

HOUSTON

State

TX

Zip Code

77253-3795

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENON ENERGY INC.

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180447

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHRISTIAN J. JACQUES

Mailing Address 4499 RUDETOWN RD.

City

HAMBURG

State

NJ

Zip Code

07419-9646

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213288

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE JAMES

Mailing Address 451 GUARDS ROAD

City

GREENWICH

State

CT

Zip Code

06831-2666

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGAN STANLEY

Occupation
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200526

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PHILIP S. JAMESON

Mailing Address 35844 W CHICAGO ST

City

LIVONIA

State

MI

Zip Code

48150-2522

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193247

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ARTHUR T. JANES

Mailing Address 301 KONAWA PL

City

LOUDON

State

TN

Zip Code

37774-2981

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213397

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. NOREEN M. JANES

Mailing Address 301 KONA WA PL

City

LOUDON

State

TN

Zip Code

37774-2981

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212145

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SYBIL J. JAKUES

Mailing Address 629 RANDOLPH ST

City

NORTHVILLE

State

MI

Zip Code

48167-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199726

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS R. JASPER

Mailing Address 129 LAKEWOOD DRIVE

City

MOUNT WASHINGTON

State

KY

Zip Code

40047-5106

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211302

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. D. PATRICIA JENNETT

Mailing Address 416 DEEPWOOD COURT

City

NAPERVILLE

State

IL

Zip Code

60540-8140

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14196836

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. PEPPER H. JENSEN

Mailing Address 1556 MOSAIC WAY

City

SMYRNA

State

GA

Zip Code

30080-3721

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180062

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DAVID E. JEREMIAH

Mailing Address 2890 MELANIE LN.

City

OAKTON

State

VA

Zip Code

22124-1809

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14182775

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HARVEY C. JEWETT, IV

Mailing Address PO BOX 1036

City

ABERDEEN

State

SD

Zip Code

57402-1036

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202370

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LUCILLE JEWETT

Mailing Address 2990 BROADWAY ST.

City

SAN FRANCISCO

State

CA

Zip Code

94115-1062

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196260

Amount of Each Receipt this Period

800.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD E. JOCELYN

Mailing Address 139 N BELMONT ST APT O

City

GLENDALE

State

CA

Zip Code

91206-4910

FEC ID number of contributing
federal political committee.

C

Name of Employer
RALPH'S GROCERY STORE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

DEPT. MANAGER

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14201465

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5860.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DONALD E. JOCELYN

Mailing Address 139 N BELMONT ST APT O

City

GLENDAL

State

CA

Zip Code

91206-4910

FEC ID number of contributing
federal political committee.

C

Name of Employer
RALPH'S GROCERY STORE

Occupation

DEPT. MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14215709

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. STEPHANIE JOHANNIS

Mailing Address 6320 WASHINGTON BOULEVARD

City

ARLINGTON

State

VA

Zip Code

22205-1906

FEC ID number of contributing
federal political committee.

C

Name of Employer
VERIZON

Occupation

VP PUBLIC POLICY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194231

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. A. L. JOHNSON

Mailing Address 571 ORIOLE LANE

City

CORONA

State

CA

Zip Code

92879-3134

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196224

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

760.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. BOBBIE F. JOHNSON

Mailing Address 1547 DE LEON WAY

City

LIVERMORE

State

CA

Zip Code

94550-5633

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213711

Amount of Each Receipt this Period

420.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

CRAIG L. JOHNSON

Mailing Address 38794 N OAKCREST LN

City

WADSWORTH

State

IL

Zip Code

60083-9556

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZERO AIR INC

Occupation
DIRECTOR OF AVIATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221289

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DORIS S. JOHNSON

Mailing Address 302 S 69TH. ST.

City

OMAHA

State

NE

Zip Code

68132-3322

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180066

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

680.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City

SUITLAND

State

MD

Zip Code

20746-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184360

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City

SUITLAND

State

MD

Zip Code

20746-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184421

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City

SUITLAND

State

MD

Zip Code

20746-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198968

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City

SUITLAND

State

MD

Zip Code

20746-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14200775

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City

SUITLAND

State

MD

Zip Code

20746-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Transaction ID: SA11.14212682

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City

SUITLAND

State

MD

Zip Code

20746-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14223493

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GLORIA R. JOHNSON

Mailing Address 2317 DUPONT AVE

City

SUITLAND

State

MD

Zip Code

20746-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223495

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

HAROLD JOHNSON

Mailing Address P.O. BOX 130

City

BLOOMINGDALE

State

MI

Zip Code

49026-0130

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190208

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HARRISON JOHNSTON

Mailing Address 11309 EMPIRE LAKES DR

City

RALEIGH

State

NC

Zip Code

27617-8626

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188043

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 / 760

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HARRISON JOHNSTON

Mailing Address 11309 EMPIRE LAKES DR

City

RALEIGH

State

NC

Zip Code

27617-8626

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195785

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. HELEN R. JOHNSTON

Mailing Address 3005 AVALON PL

City

HOUSTON

State

TX

Zip Code

77019-5903

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211713

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK JOHNSON

Mailing Address 7 DOROTHY WAY

City

BUZZARDS BAY

State

MA

Zip Code

02532-3766

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONTRACTING SPECIALISTS
INC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ACCOUNTANT

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186900

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MILTON O. JOHNSTON

Mailing Address 19 E PALMER BND

City

SPRING

State

TX

Zip Code

77381-5405

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190475

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MILTON O. JOHNSTON

Mailing Address 19 E PALMER BND

City

SPRING

State

TX

Zip Code

77381-5405

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205881

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RICHARD C. JOHNSON

Mailing Address 4387 GRATTAN PRICE DR.

City

HARRISONBURG

State

VA

Zip Code

22801-2351

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212112

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RICHARD C. JOHNSON

Mailing Address 4387 GRATTAN PRICE DR.

City

HARRISONBURG

State

VA

Zip Code

22801-2351

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212567

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT L. JOHNSON

Mailing Address P.O. BOX 233

City

BROWNSTOWN

State

IN

Zip Code

47220-0233

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179973

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT L. JOHNSON

Mailing Address P.O. BOX 233

City

BROWNSTOWN

State

IN

Zip Code

47220-0233

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194717

Amount of Each Receipt this Period

70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. RONALD JOHNSON

Mailing Address 4715 NEWPORT AVE

City

NORFOLK

State

VA

Zip Code

23508-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199569

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SUE R. JOHNSON

Mailing Address 7380 WILDERCLIFF DR NW

City

ATLANTA

State

GA

Zip Code

30328-1143

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
NONE

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202916

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. SUZANNE JOHNSEN

Mailing Address 4505 S. YOSEMITE STREET
UNIT 107

City

DENVER

State

CO

Zip Code

80237-2520

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211710

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

710.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. SYLVESTER P. JOHNSON, III

Mailing Address 2611 CORONADO DRIVE

City

ROSWELL

State

NM

Zip Code

88201-3404

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14185140

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SYLVESTER P. JOHNSON, III

Mailing Address 2611 CORONADO DRIVE

City

ROSWELL

State

NM

Zip Code

88201-3404

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14201993

Amount of Each Receipt this Period

70.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CYRUS M. JOLLIVETTE

Mailing Address PO BOX 23549

City

JACKSONVILLE

State

FL

Zip Code

32241-3549

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Transaction ID: SA11.14231510

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1720.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. BOB JONES

Mailing Address 1100 SUWANNEE DRIVE

City

EVANSVILLE

State

IN

Zip Code

47725-7137

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189706

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. BONITA L. JONES

Mailing Address 525 75TH ST SE

City

EVERETT

State

WA

Zip Code

98203-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189703

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CAROLYN JONES

Mailing Address 2219 RIVERVIEW DR.

City

RICHMOND

State

TX

Zip Code

77469-1458

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

HOMEMAKER

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190277

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES D. JONES, JR.

Mailing Address 20918 W SUNWEST AVE

City

MEDICAL LAKE

State

WA

Zip Code

99022-9689

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192444

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CLIFF C. JONES, JR.

Mailing Address 8101 MISSION RD
#216

City

PRAIRIE VILLAGE

State

KS

Zip Code

66208-5246

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180026

Amount of Each Receipt this Period

1100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. PAULINE B. JONES

Mailing Address 4315 GALLANT FOX DR

City

EDMOND

State

OK

Zip Code

73025-0821

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204102

Amount of Each Receipt this Period

120.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1720.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. PAUL C. JOQUEL

Mailing Address 1701 W 11TH ST

City

SEDALIA

State

MO

Zip Code

65301-5220

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185621

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JEFFREY W. JORDAN

Mailing Address 4455 OLD BURLINGTON ST

City

ALPHARETTA

State

GA

Zip Code

30022-6240

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198297

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES S. JOSEPH

Mailing Address 8062 GREEN GLADE ROAD

City

JACKSONVILLE

State

FL

Zip Code

32256-7302

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14231511

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1555.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE JOSEPH

Mailing Address 365 S. HUDSON AVENUE

City

LOS ANGELES

State

CA

Zip Code

90020-4803

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERCURY INSURANCE GROUPOccupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14189705

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL L. JOSEPH

Mailing Address 2080 E 4980 S

City

OGDEN

State

UT

Zip Code

84403-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14198062

Amount of Each Receipt this Period

205.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARY L. JOURDEN

Mailing Address 4501 WHITEHALL RD

City

MUSKEGON

State

MI

Zip Code

49445-8373

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14217534

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5705.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DONALD R. JUFFER

Mailing Address P.O. BOX 69

City

WAGNER

State

SD

Zip Code

57380-0069

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Transaction ID: SA11.14213403

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GARY D. JUNK

Mailing Address 1653 LEWIS RD

City

WASHINGTON COURT H

State

OH

Zip Code

43160-9474

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14183659

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GILBERT G. JURENKA

Mailing Address 210 DORAL LN

City

ROCKPORT

State

TX

Zip Code

78382-6913

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14179299

Amount of Each Receipt this Period

135.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

435.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

COL. BILL J. KAHLER

Mailing Address 139 NICKLAUS NOOK

City

LANCASTER

State

TX

Zip Code

75146-3601

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14196043

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NICHOLAS E. KARANGELEN

Mailing Address 3100 N. NELSON STREET

City

ARLINGTON

State

VA

Zip Code

22207-5318

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRIDENT SYSTEMS, INC.Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14194165

Amount of Each Receipt this Period

30400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CAMPBELL KAUFMAN

Mailing Address 300 INDEPENDENCE AVE., SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONERSTONEOccupation
GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180448

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WALTER R. KAZMIER

Mailing Address 2210 SANTO DOMINGO AVE

City

LAS CRUCES

State

NM

Zip Code

88011-9076

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185108

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ELEANOR KEALEY

Mailing Address 1112 FEARRINGTON POST

City

PITTSBORO

State

NC

Zip Code

27312-5014

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188073

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GENE R. KEAVENEY

Mailing Address 267 BREWSTER DR

City

FAYETTEVILLE

State

NC

Zip Code

28303-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211712

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MS. NORMA KEENEY

Mailing Address 5301 WHITMORE LAKE RD

City State Zip Code
ANN ARBOR MI 48105-9635

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCFARLAND TREE SERVICE

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213756

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. CLARENCE H. KEIM

Mailing Address 6111 SANDALWOOD AVE NE

City State Zip Code
CANTON OH 44721-3338

FEC ID number of contributing
federal political committee.

C

Name of Employer
CANTON CITY HEALTH DEPT.
DAPC

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179943

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MS. JACQUELINE A. KEITH

Mailing Address 5602 LOCKWOOD RD.

City State Zip Code
CHEVERLY MD 20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190084

Amount of Each Receipt this Period

65.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. JACQUELINE A. KEITH

Mailing Address 5602 LOCKWOOD RD.

City

CHEVERLY

State

MD

Zip Code

20785-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14208527

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

NANCY KELLER

Mailing Address P.O. BOX 25009

City

ASHEVILLE

State

NC

Zip Code

28813-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14181043

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

NANCY KELLER

Mailing Address P.O. BOX 25009

City

ASHEVILLE

State

NC

Zip Code

28813-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14181047

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NANCY KELLER

Mailing Address P.O. BOX 25009

City

ASHEVILLE

State

NC

Zip Code

28813-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200764

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

NANCY KELLER

Mailing Address P.O. BOX 25009

City

ASHEVILLE

State

NC

Zip Code

28813-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201090

Amount of Each Receipt this Period

175.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. CAROL A. KELLY

Mailing Address 413 N. LEE STREET
P.O. BOX 1417-D49

City

ALEXANDRIA

State

VA

Zip Code

22314-2301

FEC ID number of contributing
federal political committee.

C

Name of Employer
NATIONAL ASSOC. OF CHAIN
DRUG STORES

Occupation
SENIOR V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187571

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. DORIS A. KELLY

Mailing Address 9957 BURL WAY

City

ORLANDO

State

FL

Zip Code

32817-4254

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179499

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. DORIS A. KELLY

Mailing Address 9957 BURL WAY

City

ORLANDO

State

FL

Zip Code

32817-4254

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181573

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DORIS A. KELLY

Mailing Address 9957 BURL WAY

City

ORLANDO

State

FL

Zip Code

32817-4254

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192198

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WALLY C. KELLY

Mailing Address 4340 N. 57TH PLACE

City

PHOENIX

State

AZ

Zip Code

85018-3224

FEC ID number of contributing
federal political committee.

C

Name of Employer
CBS OUTDOOR-405 LEXINGTON
AVENUE

Occupation

CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198327

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALBERT C. KEMPF

Mailing Address 262 ASHLEY RD

City

HOPKINS

State

MN

Zip Code

55343-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217777

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BEN F. KENNEDY

Mailing Address 3643 KOUFAX DR.

City

LANCASTER

State

CA

Zip Code

93535-2491

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194358

Amount of Each Receipt this Period

220.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. PATRICIA A. KENNEL

Mailing Address 900 W. GRAND OAK DRIVE

City

PEORIA

State

IL

Zip Code

61615-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190175

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE H. KERCKHOVE

Mailing Address N5854 ABNET ROAD

City

ONALASKA

State

WI

Zip Code

54650-8925

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175448

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LENA BETH KERSHENBAUM

Mailing Address 12721 METCALF AVENUE

City

OVERLAND PARK

State

KS

Zip Code

66213-2617

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198343

Amount of Each Receipt this Period

3750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4410.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DONALD J. KESTER

Mailing Address 1 W. VIRGINIA AVE.

City

WEST CHESTER

State

PA

Zip Code

19380-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14224312

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SURESH S. KHANNA

Mailing Address 11 OX RDG. RD.

City

ELMSFORD

State

NY

Zip Code

10523-1705

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202108

Amount of Each Receipt this Period

155.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LOIS KILLEBREW

Mailing Address 103 PALISADES DR

City

SIGNAL MTN

State

TN

Zip Code

37377-3086

FEC ID number of contributing
federal political committee.

C

Name of Employer
MOUNTAIN CITY REALTORSOccupation
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202418

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 298 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MISS JAIME KIM

Mailing Address 14044 34TH AVE APT 1C

City

FLUSHING

State

NY

Zip Code

11354-3067

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190196

Amount of Each Receipt this Period

140.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MIKE F. KIMBALL

Mailing Address 106 EDGEWATER DR

City

NEW IBERIA

State

LA

Zip Code

70563-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188863

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GEORGE T. KIMBELL

Mailing Address 2404 FARINGTON RD.

City

WICHITA FALLS

State

TX

Zip Code

76308-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer
BURK ROYALTY CO LTD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

OIL AND GAS EXPLORATION

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217360

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BARRY KING

Mailing Address 15007 BENFER RD.

City

HOUSTON

State

TX

Zip Code

77069-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
C.P.A.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183104

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. KEVIN A. KING

Mailing Address 101 W CASCADE WAY
STE. 201

City

SPOKANE

State

WA

Zip Code

99208-6000

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185411

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM C. KIRKWOOD

Mailing Address 3201 GLACIER

City

CASPER

State

WY

Zip Code

82604-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
GEOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211693

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 300 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. BENT KJOS

Mailing Address 6308 SE 22ND ST

City

MERCER ISLAND

State

WA

Zip Code

98040-2010

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEATTLE RADIOLOGIST

Occupation

RADIOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187570

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GREGORY L. KLEIN

Mailing Address 11012 RACCOON RIDGE CT

City

RESTON

State

VA

Zip Code

20191-4911

FEC ID number of contributing
federal political committee.

C

Name of Employer
NATL. CABLE AND TELECOMMU-
NICATIONS ASS

Occupation

VP - RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194176

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RONALD J. KLEIN

Mailing Address 5923 BURNHAM RD.

City

NAPLES

State

FL

Zip Code

34119-8401

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14207654

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. FREDERICK A. KLINGENSTEIN

Mailing Address 787 7TH. AVE FL 6

City

NEW YORK

State

NY

Zip Code

10019-6018

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14202974

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD G. KNAPP

Mailing Address 1400 N. DRAKE ROAD
APT. 177

City

KALAMAZOO

State

MI

Zip Code

49006-1969

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192368

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD L. KNOEBEL

Mailing Address 206 KNOEBELS BLVD.

City

ELYSBURG

State

PA

Zip Code

17824-7125

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14195534

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GARY B. KNUST

Mailing Address 5773 WOODWAY #450

City

HOUSTON

State

TX

Zip Code

77057-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROMACHNE

Occupation
OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221263

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. ROBERT L. KOLLMORGEN

Mailing Address 4400 161ST. ST.

City

URBANDALE

State

IA

Zip Code

50323-2419

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222054

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CASPER KOVARIK

Mailing Address 2432 CLARJON DRIVE

City

BALLWIN

State

MO

Zip Code

63021-7821

FEC ID number of contributing
federal political committee.

C

Name of Employer
ABENCS, LLC

Occupation
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217783

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CASPER KOVARIK

Mailing Address 2432 CLARJON DRIVE

City

BALLWIN

State

MO

Zip Code

63021-7821

FEC ID number of contributing
federal political committee.

C

Name of Employer
ABENCS, LLC

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221547

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BURNELL KRAFT

Mailing Address 12 ALLEN BEND PL

City

DECATUR

State

IL

Zip Code

62521-5402

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201550

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN KRAFT

Mailing Address 40 DEAL LN

City

WARETOWN

State

NJ

Zip Code

08758-2661

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOMURRO & DAVIDSON

Occupation

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191691

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES R. KRAUSE

Mailing Address 4615 RADER PASS

City

SAN ANTONIO

State

TX

Zip Code

78247-5816

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181432

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES R. KRAUSE

Mailing Address 4615 RADER PASS

City

SAN ANTONIO

State

TX

Zip Code

78247-5816

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217832

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HENRY KURUSZ, JR.

Mailing Address 12501 VILLAGE CIRCLE DR
APT 340

City

SAINT LOUIS

State

MO

Zip Code

63127-1732

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179974

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 305 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JANET KYREAGES

Mailing Address P.O. BOX 111

City

YORK HARBOR

State

ME

Zip Code

03911-0111

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186593

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JOHN S. LAMBERT

Mailing Address 2 OLD TRESTLE LN

City

BATESVILLE

State

AR

Zip Code

72501-9599

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PHYSICIAN

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202137

Amount of Each Receipt this Period

225.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MILTON J. LAMPROS

Mailing Address 5540 SW HEWETT BLVD

City

PORTLAND

State

OR

Zip Code

97221-2239

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

BUSINESS OWNER

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14213714

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOSEPH S. LAMY

Mailing Address 1717 W 6TH. ST.

City

AUSTIN

State

TX

Zip Code

78703-4773

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193331

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SAMUEL G. LANCASTER

Mailing Address 1808 BELMONT ROD N.W. #2

City

WASHINGTON

State

DC

Zip Code

20009-5186

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

GOVERNMENT AFFAIRS

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14186208

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

CHARGED BACK

C.

Full Name (Last, First, Middle Initial)

MR. SAMUEL G. LANCASTER

Mailing Address 1808 BELMONT ROD N.W. #2

City

WASHINGTON

State

DC

Zip Code

20009-5186

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

GOVERNMENT AFFAIRS

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202342A

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

CHARGED BACK \$5,000.00 ON
04/19/2011

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 307 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. SAMUEL G. LANCASTER

Mailing Address 1808 BELMONT ROD N.W. #2

City

WASHINGTON

State

DC

Zip Code

20009-5186

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST

Occupation

GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202342B

Amount of Each Receipt this Period

-5000.00

CONTRIBUTION

CHARGED BACK

B.

Full Name (Last, First, Middle Initial)

MRS. JANE J. LANCTOT

Mailing Address 74 PIEDMONT STREET

City

SAN FRANCISCO

State

CA

Zip Code

94117-4508

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183111

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. MATTHEW LANDFRIED

Mailing Address 33 CHANDLER AVE 2ND FLR.

City

BATAVIA

State

NY

Zip Code

14020-1684

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENNESSE OTHRAPEDICS AND
SPORTS MED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175536

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

-4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 308 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD LANDON

Mailing Address 109 LAKE DR

City

WILLIAMSBURG

State

VA

Zip Code

23185-3112

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193085

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. KYLE W. LANDT

Mailing Address 5 WING RD

City

EPSOM

State

NH

Zip Code

03234-4721

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197232

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DOROTHY D. LANE

Mailing Address 142 NEW LEICESTER WAY

City

ASHEVILLE

State

NC

Zip Code

28806-1918

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14216974

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 309 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

REV. MICHAEL LANE

Mailing Address 2212 MCDONOUGH STREET

City

JOLIET

State

IL

Zip Code

60436-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROMAN CATHOLIC DIOCESE

Occupation

ROMAN CATHOLIC PRIEST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14193923

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. PATRICIA LANGENFELDER

Mailing Address 11974 BLACKS STATION RD

City

KENNEDYVILLE

State

MD

Zip Code

21645-3636

FEC ID number of contributing
federal political committee.

C

Name of Employer
GRAND VIEW FARM LLC

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175514

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MATHEW LAPINSKI

Mailing Address 1210 R ST NW APT 304

City

WASHINGTON

State

DC

Zip Code

20009-4388

FEC ID number of contributing
federal political committee.

C

Name of Employer
SONNENSCHNEIN NATH & ROSEN-
THAL

Occupation

SENIOR MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197674

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ANN GRAY LARGE

Mailing Address 515 CHURCH RD.

City

PHOENIXVILLE

State

PA

Zip Code

19460-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer
VOLUNTEER

Occupation

VOLUNTEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182155

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HOYT H. LARISON

Mailing Address 12021 N. VISTAWOOD COURT

City

SPOKANE

State

WA

Zip Code

99218-2968

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14202385

Amount of Each Receipt this Period

16400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LEMUEL LARUE

Mailing Address 107 ALAN-A-DALE CIR

City

DENTON

State

TX

Zip Code

76209

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186637

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

17000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

STEVEN LARUE

Mailing Address 1087 E 1000 RD

City

LAWRENCE

State

KS

Zip Code

66047-9408

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCGREW REAL ESTATE

Occupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14194234

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES D. LAUER

Mailing Address 1936 E DANA AVE

City

MESA

State

AZ

Zip Code

85204-1322

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196817

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. HELEN LAUER

Mailing Address 1625 CLEARWATER RD

City

SAINT CLOUD

State

MN

Zip Code

56301-5725

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190256

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES R. LAUGHLIN

Mailing Address 445 BAY HILL DR.

City

GRAFORD

State

TX

Zip Code

76449-5017

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAUGHLIN ENGINEERING

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14179948

Amount of Each Receipt this Period

175.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JUDITH LAVIN

Mailing Address 10 LAKE DRIVE

City

WEST GREENWICH

State

RI

Zip Code

02817-1561

FEC ID number of contributing
federal political committee.

C

Name of Employer
HI-TECH, INC.

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14183970

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JUDITH LAWLER

Mailing Address 7605 ROYAL TROON DR

City

FORT WORTH

State

TX

Zip Code

76179-3175

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14191623

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JUANITA L. LAWRENCE

Mailing Address 4637 NW 44TH CT

City

FORT LAUDERDALE

State

FL

Zip Code

33319-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181332

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JUANITA L. LAWRENCE

Mailing Address 4637 NW 44TH CT

City

FORT LAUDERDALE

State

FL

Zip Code

33319-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202930

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ALBERT LEADER

Mailing Address PO BOX 1714

City

PINEHURST

State

NC

Zip Code

28370-1714

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175543

Amount of Each Receipt this Period

430.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

710.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH C. LEAHY

Mailing Address 34175 SW PEAKS VIEW DR

City

HILLSBORO

State

OR

Zip Code

97123-9055

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202076

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT W. LEASE

Mailing Address 12501 LAKE SHORE CT N

City

FORT WORTH

State

TX

Zip Code

76179-6652

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VICE PRESIDENT

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197668

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL C. LEBENS

Mailing Address 6634 BURT ST.

City

OMAHA

State

NE

Zip Code

68132-2628

FEC ID number of contributing
federal political committee.

C

Name of Employer
TENASKA, INC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PRESIDENT

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180443

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HARRY G. LEE

Mailing Address 1500 WESTBROOK CT.
APT 2145

City State Zip Code
RICHMOND VA 23227-3371

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14183694

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN R. LEE, JR.

Mailing Address 120 NORTH TOPANGA CANYON ROAD

City State Zip Code
TOPANGA CA 90290-3851

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177696

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY LEE

Mailing Address 27 S. CREEDMOOR WAY

City State Zip Code
ANDERSON IN 46011-9019

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
VETERINARIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189333

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

YUNG J. LEE

Mailing Address 909 BOREN AVE APT. 506

City

SEATTLE

State

WA

Zip Code

98104-1381

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185692

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

YUNG J. LEE

Mailing Address 909 BOREN AVE APT. 506

City

SEATTLE

State

WA

Zip Code

98104-1381

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219256

Amount of Each Receipt this Period

70.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STANLEY G. LEHMAN

Mailing Address 5111 S 000 RD

City

BERNE

State

IN

Zip Code

46711-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

MANAGER

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185937

Amount of Each Receipt this Period

220.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. LEIKER

Mailing Address 12757 BREN FOREST WAY

City

MANASSAS

State

VA

Zip Code

20112-3451

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197124

Amount of Each Receipt this Period

360.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. DOUGLAS ELLIS LENG

Mailing Address 1714 SYLVAN LN.

City

MIDLAND

State

MI

Zip Code

48640-2538

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184570

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. NORMAN F. LENT, III

Mailing Address 3529 MALVERN COURT

City

ALEXANDRIA

State

VA

Zip Code

22304-1852

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOWLOHNES GOVERNMENT STRA-
TEGIES

Occupation
EVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194222

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1010.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. SUELLEN T. LESLIE

Mailing Address 4061 CREEK RD

City

KITTY HAWK

State

NC

Zip Code

27949-3830

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191731

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HERBERT A. LEVIN

Mailing Address 724 E GRINNELL DR

City

BURBANK

State

CA

Zip Code

91501-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CA

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182304

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HERBERT A. LEVIN

Mailing Address 724 E GRINNELL DR

City

BURBANK

State

CA

Zip Code

91501-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
STATE OF CA

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208448

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. GUY M. LEWIS

Mailing Address 4800 W PANTHER CREEK DR
STE 200

City State Zip Code
THE WOODLANDS TX 77381-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197661

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MICHELLE P. LEWIS

Mailing Address 714 CORTONA COURT

City State Zip Code
LEAGUE CITY TX 77573-6798

FEC ID number of contributing
federal political committee.

C

Name of Employer
NASA

Occupation
AEROSPACE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199228

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD A. LEWIS

Mailing Address PO BOX 670

City State Zip Code
UPLAND CA 91785-0670

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14216155

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD L. LEWIS

Mailing Address 11072 WICKFORD DRIVE

City

SANTA ANA

State

CA

Zip Code

92705-2364

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14211769

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHRIS J. LICATA

Mailing Address 832 FLORA ST

City

ELIZABETH

State

NJ

Zip Code

07201-1912

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLEET SERVICE INC.Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202178

Amount of Each Receipt this Period

170.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RONALD G. LINABURG

Mailing Address 924 VALLEYVIEW RD.

City

PITTSBURGH

State

PA

Zip Code

15243-1022

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Transaction ID: SA11.14222038

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

920.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CARL H. LINDNER

Mailing Address 8555 SHAWNEE RUN ROAD

City

CINCINNATI

State

OH

Zip Code

45243-3314

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN FINANCIAL GROUPOccupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14216159

Amount of Each Receipt this Period

7500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CARL H. LINDNER, III

Mailing Address 9450 WHITEGATE LANE

City

CINCINNATI

State

OH

Zip Code

45243-1648

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN FINANCIAL CORPOR-
ATIONOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.14221328

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. EDYTH B. LINDNER

Mailing Address 8555 SHAWNEE RUN ROAD

City

CINCINNATI

State

OH

Zip Code

45243-3314

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14216158

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KEITH E. LINDNER

Mailing Address 534 PONTE VEDRA BLVD.

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082-2316

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHIKUITA BRANDS

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14221329

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. S. CRAIG LINDNER

Mailing Address 7725 BUCKINGHAM ROAD

City

CINCINNATI

State

OH

Zip Code

45243-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN FINANCIAL GROUP

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14221327

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JOHN R. LINDSAY

Mailing Address 10217 OLD HUNT ROAD

City

VIENNA

State

VA

Zip Code

22181-2948

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANTIQU & CONTEMPORARY LE-
ASING INC

Occupation

FURNITURE RENTAL & SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199568

Amount of Each Receipt this Period

350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH LINDSEY

Mailing Address 3625 10TH ST N UNIT 203

City

ARLINGTON

State

VA

Zip Code

22201-4456

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206566

Amount of Each Receipt this Period

170.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RONALD LINDSAY

Mailing Address 5601 COUNTY ROAD 7550

City

LUBBOCK

State

TX

Zip Code

79424-6592

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184088

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TROY J. LINK

Mailing Address 565 45TH STREET

City

HURON

State

SD

Zip Code

57350-7939

FEC ID number of contributing
federal political committee.

C

Name of Employer
JACK LINK'S BEEF JERKY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

C.E.O.

Aggregate Year-to-Date ▼

15400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14202386

Amount of Each Receipt this Period

15400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

15670.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. LAWRENCE LIPNIK

Mailing Address 31610 PLYMOUTH RD

City

LIVONIA

State

MI

Zip Code

48150

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAWRENCE LIPNIK

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177664

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GREGORY LIPPE

Mailing Address 5950 CANOGA AVE
STE 200

City

WOODLAND HLS

State

CA

Zip Code

91367-5036

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIPPE, HELLIE, HOFFER, &
ALLISON

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207423

Amount of Each Receipt this Period

425.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ANDREW J. LITTLEFAIR

Mailing Address 110 VIA TRIESTE

City

NEWPORT BEACH

State

CA

Zip Code

92663-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229239

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5725.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DONALD LJUNGREN

Mailing Address 2165 SUGAR PINE DR

City

CAMBRIDGE

State

MN

Zip Code

55008-2378

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194780

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MICHAEL R. LOBIS

Mailing Address 989 BANESWOOD DR.

City

KENNETT SQ

State

PA

Zip Code

19348-2551

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188346

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

SUE LOHN

Mailing Address 2525 POT SPRING RD. UNIT L520

City

LUTHVLE TIMON

State

MD

Zip Code

21093-2872

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14184984

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SUE LOHN

Mailing Address 2525 POT SPRING RD. UNIT L520

City

LUTHVLE TIMON

State

MD

Zip Code

21093-2872

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198960

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SUE LOHN

Mailing Address 2525 POT SPRING RD. UNIT L520

City

LUTHVLE TIMON

State

MD

Zip Code

21093-2872

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220725

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BETTE W. LORENZEN

Mailing Address 429 NOOTKA TRL

City

FRANKFORT

State

KY

Zip Code

40601-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211144

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ARCHIE T. LOS

Mailing Address 15 HOBSON AVENUE

City

TIVERTON

State

RI

Zip Code

02878-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188510

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. BETH LOTSPEICH

Mailing Address 4415 SABAL PALM RD

City

MIAMI

State

FL

Zip Code

33137-3377

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180070

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. GRACE LOUGHEAD

Mailing Address 1538 W RIDGE ST APT 6

City

MARQUETTE

State

MI

Zip Code

49855-3133

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193519

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

860.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LEAH LOUGH

Mailing Address 2321 N QUANTICO ST

City

ARLINGTON

State

VA

Zip Code

22205-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197123

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LEAH LOUGH

Mailing Address 2321 N QUANTICO ST

City

ARLINGTON

State

VA

Zip Code

22205-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213386

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WINIFRED M. LOUIS

Mailing Address 13615 LANDMARK HL

City

SAN ANTONIO

State

TX

Zip Code

78217-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184949

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. PAUL S. LOVETT

Mailing Address 18 BASSWOOD CT

City

CATONSVILLE

State

MD

Zip Code

21228-5869

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14189399

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DESTINY K. LUCAS

Mailing Address 131 LOW COUNTRY LN

City

SPRING

State

TX

Zip Code

77380-3159

FEC ID number of contributing
federal political committee.**C**Name of Employer
FAMILY PSY OF THE WOODLAN-
DSOccupation
CLINICAL THERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14216851

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. HARRIET T. LUDWICK

Mailing Address 3200 W CALHOUN PKWY APT 803

City

MINNEAPOLIS

State

MN

Zip Code

55416-3290

FEC ID number of contributing
federal political committee.**C**Name of Employer
AMERIPRIDE INC.Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14216323

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2330.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN L. LUDWIG

Mailing Address P.O. BOX 31212

City

SEA ISLAND

State

GA

Zip Code

31561-1212

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192837

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MARCIA P. LUNKA

Mailing Address 1825 MOORINGLINE DR. PH C

City

VERO BEACH

State

FL

Zip Code

32963-3060

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14187192

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MARCIA P. LUNKA

Mailing Address 1825 MOORINGLINE DR. PH C

City

VERO BEACH

State

FL

Zip Code

32963-3060

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192824

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TOMMY B. LYLE

Mailing Address 12607 BAYOU MEAD CT.

City

HUMBLE

State

TX

Zip Code

77346-3075

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203922

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

TOMMY B. LYLE

Mailing Address 12607 BAYOU MEAD CT.

City

HUMBLE

State

TX

Zip Code

77346-3075

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206705

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. LYNCH

Mailing Address 33 HOMESDALE ROAD

City

BRONXVILLE

State

NY

Zip Code

10708-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF AMERICA MERRILL
LYNCH

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194153

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH R. MAAS

Mailing Address 200 SALES DRIVE

City

HARRISON

State

OH

Zip Code

45030-1485

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189745

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD MABE

Mailing Address 301 SANDERLING AVE

City

GEORGETOWN

State

SC

Zip Code

29440-7031

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221302

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CHARLOTTE MABRY

Mailing Address 16 WIDELoop RD

City

ROLLING HILLS

State

CA

Zip Code

90274-5234

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223569

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 333 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TOM B. MACCABE

Mailing Address 284 SUGAR MILL DR.

City

OSPREY

State

FL

Zip Code

34229-9080

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188136

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

RICHARD A. MACDONELL

Mailing Address 230 ATHERTON AVE

City

ATHERTON

State

CA

Zip Code

94027-5419

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202189

Amount of Each Receipt this Period

410.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LINDA P. MADDEN

Mailing Address 345 SHIRE OAKS CT.

City

LAFAYETTE

State

CA

Zip Code

94549-5636

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207363

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1060.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 334 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HENRY MADLEY

Mailing Address 3648 62ND AVE E

City

BRADENTON

State

FL

Zip Code

34203-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192217

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. MARY A. MADLEY

Mailing Address 3648 62ND AVE. E

City

BRADENTON

State

FL

Zip Code

34203-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14199830

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DANIEL J. MAGNIE

Mailing Address 16 S MONROE ST

City

DENVER

State

CO

Zip Code

80209-3006

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14185927

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 335 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES MAHONEY

Mailing Address 608 1ST AVE

City

SPRING LAKE

State

NJ

Zip Code

07762-1104

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14191130

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. GEORGE MAKAR

Mailing Address 5 COTTONWOOD DRIVE

City

LUMBERTON

State

NJ

Zip Code

08048-5297

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF PENNSYLVANIA

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14195447

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FREDERICK R. MALESA

Mailing Address 6946 MESA DR

City

FORT WORTH

State

TX

Zip Code

76132-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF RAILWAY

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197662

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

960.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOANNE MANN

Mailing Address 245 GRAY ST

City

WEST PALM BEACH

State

FL

Zip Code

33405-4705

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

STOCK INVESTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213737

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MARY O. MANRY

Mailing Address 911 CHERRY ST.

City

UVALDE

State

TX

Zip Code

78801-4801

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194362

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BOBBY MARANDI

Mailing Address 1143 ASHLAND STREET

City

HOUSTON

State

TX

Zip Code

77008-6737

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRICE WATERHOUSE COOPERS

Occupation

PARTNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194212

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. SIDNEY M. MARCHASIN

Mailing Address 2908 FRANCISCAN CT

City

SAN CARLOS

State

CA

Zip Code

94070-4305

FEC ID number of contributing
federal political committee.

C

Name of Employer
CATHOLIC HEALTHCARE WEST

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14215934

Amount of Each Receipt this Period

750.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RUBIN MARGULES

Mailing Address 20 OCEAN COURT

City

BROOKLYN

State

NY

Zip Code

11223-6054

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARM MANAGEMENT

Occupation
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204214

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DONNA M. MARIANO

Mailing Address 63 DWYER ST

City

WEST SENECA

State

NY

Zip Code

14224-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179976

Amount of Each Receipt this Period

85.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

935.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. STEVEN MARIN

Mailing Address 16155 SW 117 AVENUE
SUITE B-21City
MIAMIState
FLZip Code
33177-1617FEC ID number of contributing
federal political committee.

C

Name of Employer
MARIN AND SONSOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180440

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE MARLATT

Mailing Address 257 BROOK ST LOWR

City

SAUGATUCK

State

MI

Zip Code
49453-9696FEC ID number of contributing
federal political committee.

C

Name of Employer
ENERGYOccupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14179945

Amount of Each Receipt this Period

310.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BARBARA MARMET

Mailing Address P.O. BOX 263

City

BOCA GRANDE

State

FL

Zip Code
33921-0263FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194894

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 339 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MARIE M. MARSHALL

Mailing Address 100 RIDGESTONE RD

City

CHATTANOOGA

State

TN

Zip Code

37411

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188235

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. EDWARD EARL MARTIN, JR.

Mailing Address 12309 MUHLY COVE

City

AUSTIN

State

TX

Zip Code

78738-6039

FEC ID number of contributing
federal political committee.

C

Name of Employer
TILSON HOME CORPORATION

Occupation

HOMEBUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211778

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRANCIS J. MARTIN

Mailing Address 21010 OAKLEY HILL CT

City

RICHMOND

State

TX

Zip Code

77406-7058

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186278

Amount of Each Receipt this Period

45.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 / 760
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. FRANCIS J. MARTIN

Mailing Address **21010 OAKLEY HILL CT**

City State Zip Code
RICHMOND TX 77406-7058

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

04 / 18 / 2011

Transaction ID: SA11.14203563

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. FRANCIS J. MARTIN

Mailing Address **21010 OAKLEY HILL CT**

City State Zip Code
RICHMOND TX 77406-7058

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

04 / 18 / 2011

Transaction ID: SA11.14205062

Amount of Each Receipt this Period

45.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JAMES H. MARTIN

Mailing Address **14111 W YOSEMITE DR.**

City State Zip Code
SUN CITY WEST AZ 85375-5646

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

04 / 06 / 2011

Transaction ID: SA11.14186787

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 341 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JANINE M. MARTIN

Mailing Address 23090 W. ASH CREEK ROAD

City

WILLCOX

State

AZ

Zip Code

85643-7526

FEC ID number of contributing
federal political committee.

C

Name of Employer
BROKEN DIPPER RANCH

Occupation

CATTLE RANCHER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14200964

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NICHOLAS P. MARTIN

Mailing Address 19 WATERS EDGE

City

SHIRLEY

State

NY

Zip Code

11967-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14197274

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. SAMUEL P. MARTIN

Mailing Address 70 W GORE ST
STE 202

City

ORLANDO

State

FL

Zip Code

32806-1124

FEC ID number of contributing
federal political committee.

C

Name of Employer
VASCULAR VIEN CENTERS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14207279

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 342 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY W. MARTIN

Mailing Address 1400 HILLSBOROUGH LN

City

LITTLE ROCK

State

AR

Zip Code

72212-3775

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221291

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM O. MARTIN

Mailing Address 4408 SW HOLLY LN

City

TOPEKA

State

KS

Zip Code

66604-1933

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190226

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ANNE MASON

Mailing Address 149 FALCON CRST

City

WARNER ROBINS

State

GA

Zip Code

31088-7567

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183159

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. BONNIE J. MASON

Mailing Address 917 S BELMONT AVE

City

WATSEKA

State

IL

Zip Code

60970-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179971

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. HELEN M. MASON

Mailing Address 9629 LANGDON AVE

City

NORTH HILLS

State

CA

Zip Code

91343-2104

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210957

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JERRY L. MASON

Mailing Address 5335 SILVER DR.

City

COLORADO SPGS

State

CO

Zip Code

80918-4904

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179954

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JACK C. MASSEY

Mailing Address 4431 TYNE BLVD

City

NASHVILLE

State

TN

Zip Code

37215-4537

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198884

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JACK D. MASSIMINO

Mailing Address 389 E BOULDERVILLE RD

City

KAMAS

State

UT

Zip Code

84036-9515

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194168

Amount of Each Receipt this Period

4200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL A. MATA

Mailing Address 4081 PEACHTREE DUNWOODY RD NE

City

ATLANTA

State

GA

Zip Code

30342-3936

FEC ID number of contributing
federal political committee.

C

Name of Employer
ING

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210479

Amount of Each Receipt this Period

750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. LAEL W. MATHIS

Mailing Address 11620 COURT OF PALMS APT. 502

City

FORT MYERS

State

FL

Zip Code

33908-6566

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192358

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. LAEL W. MATHIS

Mailing Address 31 LANCASTER CT

City

BURR RIDGE

State

IL

Zip Code

60527-7931

FEC ID number of contributing
federal political committee.

C

Name of Employer
G. E. MATHIS CO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

STEEL FABRICATION

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214839

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HOWARD MATHRE

Mailing Address 13642 HUGHES RD.

City

NEWARK

State

IL

Zip Code

60541-9114

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

FARMER

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190229

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DONALD J. MATTHEWS

Mailing Address 561 HOLLAND RD.

City

FAR HILLS

State

NJ

Zip Code

07931-2643

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14187964

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. BETTY C. MAULER

Mailing Address 2525 POT SPRING RD UNIT L525

City

LUTHERVILLE TIMONI

State

MD

Zip Code

21093-2872

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186819

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GREGORY M. MAURER

Mailing Address 2507 N. VERNON ST.

City

ARLINGTON

State

VA

Zip Code

22207-4008

FEC ID number of contributing
federal political committee.

C

Name of Employer
UPS

Occupation
PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180453

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE L. MAYER

Mailing Address 2 ANDREWS RD

City

ESSEX

State

CT

Zip Code

06426-1311

FEC ID number of contributing
federal political committee.

C

Name of Employer
MANHATTAN REALTY GROUP

Occupation

REAL ESTATE SALESMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222478

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MICHAEL T. MAZUR

Mailing Address 6962 SAINT ANDREWS CIR.

City

FAYETTEVILLE

State

NY

Zip Code

13066-9737

FEC ID number of contributing
federal political committee.

C

Name of Employer
PATHOLOGY ASSOC. OF SYRAC-
AUSE

Occupation

PATHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222178

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. EMELDA N. MBAH

Mailing Address 10070 WESTPARK DRIVE
APT. 1014

City

HOUSTON

State

TX

Zip Code

77042-5726

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMBASSADOR CORNER ENTERPRI-
SES

Occupation

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14215933

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. CAROL MC FADDEN

Mailing Address 312 W 11TH ST

City

NEW YORK

State

NY

Zip Code

10014-2369

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRESCENT DIRECTIONAL DRILL

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219771

Amount of Each Receipt this Period

620.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVE MC MANUS

Mailing Address 2304 N MAIN ST

City

VICTORIA

State

TX

Zip Code

77901-3806

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219180

Amount of Each Receipt this Period

225.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. NEILL G. MCBRYDE

Mailing Address 851 HEMPSTEAD PL

City

CHARLOTTE

State

NC

Zip Code

28207-2323

FEC ID number of contributing
federal political committee.

C

Name of Employer
MOORE & VAN ALLEN MCC

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200143

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CALVIN R. MCCAFFERTY

Mailing Address 1476 TIGER BUTTE ROAD

City

BELT

State

MT

Zip Code

59412-8205

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

CATTLE RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208331

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DONALD D. MCCALLA

Mailing Address 105 LINDA ISLE

City

NEWPORT BEACH

State

CA

Zip Code

92660-7210

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192473

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY J. MCCALLION

Mailing Address 4164 OAK PLACE DRIVE

City

WESTLAKE VILLAGE

State

CA

Zip Code

91362-5128

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194232

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES A. MCCANDLESS

Mailing Address 3784 GRATIOT AVE

City

PORT HURON

State

MI

Zip Code

48060-1591

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178413

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN MCCANDLESS

Mailing Address 58 W RIVER DR

City

BEAUFORT

State

SC

Zip Code

29907-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186534

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KERRY MCCAN

Mailing Address P.O. BOX 146

City

VICTORIA

State

TX

Zip Code

77902-0146

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212109

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ROBERT E. MCCARTHY

Mailing Address 25611 EMERALD TERRACE WAY

City
SPRING

State
TX

Zip Code
77389-4064

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189376

Amount of Each Receipt this Period

220.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. AUBREY K. MCCLENDON

Mailing Address 6100 N. WESTERN AVENUE

City

OKLAHOMA CITY

State

OK

Zip Code
73118-1044

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHESAPEAKE ENERGY CORP.

Occupation
CHAIRMAN & C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221946

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES MCCLOSKEY

Mailing Address 11086 BIG CANOE

City

BIG CANOE

State

GA

Zip Code
30143-5143

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208193

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID MCCOLLUM

Mailing Address 26905 HEATHERWOOD CIR.

City

OLMSTED FALLS

State

OH

Zip Code

44138-1171

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177668

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES MCCORMICK

Mailing Address 3587 N GRAYHAWK LOOP

City

LECANTO

State

FL

Zip Code

34461-8474

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218085

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES W. MCCOY

Mailing Address 1311 VIERRA CT

City

SAN JOSE

State

CA

Zip Code

95125-3439

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAC KAY & SOUNDS

Occupation

CIVIL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175511

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. BRUCE MCCULLOUGH

Mailing Address 5188 MOUNTAIN TOP RD. E

City

NEW HOPE

State

PA

Zip Code

18938-5439

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187302

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL B. MCDANIEL

Mailing Address 218 SAMARITAN LANE

City

MOSCOW

State

ID

Zip Code

83843-8552

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205065

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GORGE C. MCFARLAND

Mailing Address 100 GRAYS LANE

City

HAVERFORD

State

PA

Zip Code

19041

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

HOMEMAKER

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193087

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. TOMMIE MCGOWIN

Mailing Address 1306 N ALABAMA

City

OKMULGEE

State

OK

Zip Code

74447-7019

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192451

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. TOMMIE MCGOWIN

Mailing Address 1306 N ALABAMA

City

OKMULGEE

State

OK

Zip Code

74447-7019

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192494

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TERENCE P. MCILHARGEY

Mailing Address 2055 OAK INDUSTRIAL DR NE

City

GRAND RAPIDS

State

MI

Zip Code

49505-6011

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

MFG. REP

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185922

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. JOANNA K. MCINTOSH

Mailing Address 209 PRINCESS STREET

City

ALEXANDRIA

State

VA

Zip Code

22314-2326

FEC ID number of contributing
federal political committee.

C

Name of Employer
VERIZON

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194208

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

THOMAS P. MCINTOSH, JR.

Mailing Address 18773 NW 72ND AVE

City

ALACHUA

State

FL

Zip Code

32615-7724

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198901

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TIM MCINTURF

Mailing Address P.O. BOX 27369

City

HOUSTON

State

TX

Zip Code

77227-7369

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUANTLAB FINANCIAL, LLC

Occupation

EXECUTIVE VICE PRESIDENT, LEGAL AFFAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 1

Transaction ID: SA11.14197915

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JEAN C. MCKEE

Mailing Address P.O. BOX 1021

City

NEW LONDON

State

NH

Zip Code

03257-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187410

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. JOSEPH S. MCKELL

Mailing Address 17 OVERLOOK DRIVE
P.O. BOX 328

City

CHILLICOTHE

State

OH

Zip Code

45601-1926

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213850

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JEWELL MCKINNEY

Mailing Address 304 E. CENTER STREET

City

KINGSPORT

State

TN

Zip Code

37660-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOWN & COUNTRY REALTY

Occupation
REALTOR/BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14186212

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

680.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. JEWELL MCKINNEY

Mailing Address 304 E. CENTER STREET

City

KINGSPORT

State

TN

Zip Code

37660-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOWN & COUNTRY REALTY

Occupation

REALTOR/BROKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14198324

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVEN G. MCKNIGHT

Mailing Address 7000 FALLS REACH DRIVE
NO. 211

City

FALLS CHURCH

State

VA

Zip Code

22043-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer
CASSIDY & ASSOCIATES

Occupation

CONSULTANT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14197679

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES E. MCKOWN

Mailing Address 2181 WHISPERING HILLS CT

City

WASHINGTON

State

MI

Zip Code

48094-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202219

Amount of Each Receipt this Period

425.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. BETTY H. MCLAUGHLIN

Mailing Address 441 S PLYMOUTH BLVD

City

LOS ANGELES

State

CA

Zip Code

90020-4706

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208140

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. JILL M. MCLOUD

Mailing Address 4478 S FARM ROAD 189

City

ROGERSVILLE

State

MO

Zip Code

65742-7237

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217511

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GERALD T. MCNULTY

Mailing Address 440 SOUTH LASALLE

City

CHICAGO

State

IL

Zip Code

60605-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF AMERICA MERRILL
LYNCH

Occupation

FLOOR TRADER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202375

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GUY MCROBERTS

Mailing Address 9137 MCNOUN ROAD

City

WINCHESTER

State

OH

Zip Code

45697-9613

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197116

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

FRANCES J. MEADOWS

Mailing Address 9801 W FM 4

City

GODLEY

State

TX

Zip Code

76044-3909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188341

Amount of Each Receipt this Period

180.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MATTHEW MEEK

Mailing Address 6 BRET HARTE AVE

City

RENO

State

NV

Zip Code

89509-1933

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222598

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ANEASE MEIER

Mailing Address 4217 RIVER BND.

City

SAN ANGELO

State

TX

Zip Code

76903-8024

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14209806

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. TATYANA MELAMED

Mailing Address 3040 MARCO ST
STE 113

City

LAS VEGAS

State

NV

Zip Code

89115-4605

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLOVER TABLE CONSTRUCTIONOccupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Transaction ID: SA11.14221294

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RIFAT MEMETI

Mailing Address 499 STEUBEN STREET

City

STATEN ISLAND

State

NY

Zip Code

10305-2719

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14194182

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. R. MERCER

Mailing Address 11 BERKSHIRE

City

TRABUCO CANYON

State

CA

Zip Code

92679-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer
SC FUELSOccupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190233

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES MERRIMAN

Mailing Address 5507 CARY STREET ROAD

City

RICHMOND

State

VA

Zip Code

23226-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14179576

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MARJORIE T. MERRIMAN

Mailing Address 1055 W JOPPA RD. UNIT 549

City

TOWSON

State

MD

Zip Code

21204-3776

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
VISUAL ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14200059

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 362 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL A. MERRIMAN

Mailing Address 300 W. 11TH STREET

City

KANSAS CITY

State

MO

Zip Code

64105-1618

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

15400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198346

Amount of Each Receipt this Period

15400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DANIEL P. MEYER

Mailing Address 2506 DUXBURY PLACE

City

ALEXANDRIA

State

VA

Zip Code

22308-2138

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE DUBERSTEIN GROUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VICE PRESIDENT

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14202384

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LISA MEYER

Mailing Address 300 INDEPENDENCE AVE., SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE GOVERNMENT AF-
FAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

GOVERNMENT AFFAIRS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197676

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

21400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ROGER F. MEYER

Mailing Address 2139 BLAIRMONT DR.

City

PITTSBURGH

State

PA

Zip Code

15241-2204

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203578

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS MEYER

Mailing Address 3240 WILSON BLVD. # 120

City

ARLINGTON

State

VA

Zip Code

22201-4429

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONDO 1, INC.Occupation
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210972

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. EDWARD C. MICHAUD

Mailing Address 12 HIGHLAND STREET

City

WESTON

State

MA

Zip Code

02493-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ORTHODONTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178928

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. EDWARD C. MICHAUD

Mailing Address 12 HIGHLAND STREET

City

WESTON

State

MA

Zip Code

02493-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ORTHODONTIST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14179253

Amount of Each Receipt this Period

10.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. EDWARD C. MICHAUD

Mailing Address 12 HIGHLAND STREET

City

WESTON

State

MA

Zip Code

02493-1110

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ORTHODONTIST

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.14220606

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. WILLIAM A. MIDDLETON, M.D.

Mailing Address P.O. BOX 31

City

WINONA

State

MS

Zip Code

38967-0031

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14226027

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TERESA D. MILAM

Mailing Address 1033 PONTE VEDRA BLVD.

City

PONTE VEDRA

State

FL

Zip Code

32082-4016

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223571

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

RICK MILES

Mailing Address 446 N 4108 E

City

RIGBY

State

ID

Zip Code

83442-5541

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219719

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. BARBARA MILLER

Mailing Address 7 HUNTLEY CT.

City

HAINES CITY

State

FL

Zip Code

33844-8606

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180039

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH P. MILLS

Mailing Address 2803 COUGAR AVE

City

CODY

State

WY

Zip Code

82414-8400

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183090

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

KAREN MINTON

Mailing Address 5333 E 115TH PL

City

TULSA

State

OK

Zip Code

74137-8007

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221305

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RAYMOND MINZNER

Mailing Address 2133 MUSKOGEE TRL.

City

NOKOMIS

State

FL

Zip Code

34275-5329

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223769

Amount of Each Receipt this Period

360.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

710.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DENNIS E. MITCHEM

Mailing Address 77 E MISSOURI AVE UNIT 63

City

PHOENIX

State

AZ

Zip Code

85012-1385

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186505

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JIMMY F. MITCHELL

Mailing Address 14202 E RIDGE CIR

City

ARP

State

TX

Zip Code

75750-9645

FEC ID number of contributing
federal political committee.

C

Name of Employer
HEALTHY FIGURES WT. LOSS

Occupation
SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206949

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LOIS M. MITCHELL

Mailing Address 1850 FOX BRIDGE COURT

City

FALLBROOK

State

CA

Zip Code

92028-8204

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213739

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

710.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MICHAEL MOISIO

Mailing Address P.O. BOX 12458

City

ZEPHYR COVE

State

NV

Zip Code

89448-4458

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220282

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SUSAN MONATH

Mailing Address 2001 KOOKUK ST APT 4

City

IOWA CITY

State

IA

Zip Code

52240-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175449

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

SUSAN MONATH

Mailing Address 2001 KOOKUK ST APT 4

City

IOWA CITY

State

IA

Zip Code

52240-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14215920

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ALVARO MONTEALEGRE

Mailing Address 415 EMBASSY OAKS DR
STE. 100

City State Zip Code
SAN ANTONIO TX 78216-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer
MURO GROUP, INC.

Occupation
GENERAL MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198382

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ELLEN A. MONTGOMERY

Mailing Address 924 E JUNEAU AVE UNIT 510

City State Zip Code
MILWAUKEE WI 53202-2789

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190445

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MARY K. MONTGOMERY

Mailing Address 7433 SOMERSET RD.

City State Zip Code
KNOXVILLE TN 37909-2356

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205435

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MARY K. MONTGOMERY

Mailing Address 7433 SOMERSET RD.

City

KNOXVILLE

State

TN

Zip Code

37909-2356

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209205

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN S. MOODY

Mailing Address 3263 REBA DRIVE

City

HOUSTON

State

TX

Zip Code

77019-6211

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARKSIDE CAPITAL

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194216

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES F. MOONEY, JR.

Mailing Address 220 BOYLSTON ST.

City

BOSTON

State

MA

Zip Code

02116

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180000

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2910.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CLARENCE C. MOORE

Mailing Address 437 BOSQUE CIR

City

BLYTHEWOOD

State

SC

Zip Code

29016-7927

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212884

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JACK MOORE

Mailing Address 23618 U S HWY 277 SOUTH

City

CHRISTOVAL

State

TX

Zip Code

76935-3234

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221335

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. TIFFANY MOORE

Mailing Address 417 QUACKENBOS STREET, NW

City

WASHINGTON

State

DC

Zip Code

20011-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer
VENABLE LLP

Occupation
SENIOR LEGISLATIVE ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194229

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY J. MOORE

Mailing Address 6169 EAGLES NEST DR

City

JUPITER

State

FL

Zip Code

33458-2472

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179951

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

BEVERLY A. MORAN

Mailing Address 11957 OAK SHADOW DR

City

BATON ROUGE

State

LA

Zip Code

70810-1807

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214652

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ELIAS MORENO, JR.

Mailing Address 1591 DIPLOMAT DRIVE

City

BEAVERCREEK

State

OH

Zip Code

45432-2503

FEC ID number of contributing
federal political committee.

C

Name of Employer
SERCO, INC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

LOGISTICS CONSULTANT

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188483

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID B. MORGAN

Mailing Address 316 TENNESSEE CIR.

City

MOORESVILLE

State

NC

Zip Code

28117-8466

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182152

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ANDREW MORRISON

Mailing Address 8155 N ILLINOIS ST

City

INDIANAPOLIS

State

IN

Zip Code

46260-2940

FEC ID number of contributing
federal political committee.

C

Name of Employer
WELL POINT INC

Occupation
PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222803

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ISAAC A. MORRIS

Mailing Address 2867 OUTLET ROAD

City

CLIFTON SPRINGS

State

NY

Zip Code

14432-9742

FEC ID number of contributing
federal political committee.

C

Name of Employer
G.W. LISH CO. INC

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214332

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MALCOLM S. MORRIS

Mailing Address 3992 INVERNESS

City

HOUSTON

State

TX

Zip Code

77019-1004

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEWART TITLE GUARANTY CO-
MPANY

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194203

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STAN A. MORTENSEN

Mailing Address 5683 SANTA ANA AVE

City

COSTA MESA

State

CA

Zip Code

92627

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14202381

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ANGELA C. MOSHER

Mailing Address 4751 N. 15TH STREET

City

PHOENIX

State

AZ

Zip Code

85014-3707

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207618

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KEITH MOSING

Mailing Address 10260 WESTHEIMER ROAD
STE. 700

City State Zip Code
HOUSTON TX 77042-3107

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197678

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH MOTLEY

Mailing Address 2323 CRYSTAL SPRING AVE SW

City State Zip Code
ROANOKE VA 24014-2417

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175519

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. FRANK MOYA

Mailing Address 5915 PONCE DE LEON BLVD.
STE. 19

City State Zip Code
CORAL GABLES FL 33146-2435

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202368

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DONALD B. MUENK

Mailing Address 583 RUDGATE RD.

City

BLOOMFIELD HILLS

State

MI

Zip Code

48304-3354

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188384

Amount of Each Receipt this Period

195.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HENRY MULHOLLAND

Mailing Address 24 VALLEY ROAD

City

PLANDOME

State

NY

Zip Code

11030-1437

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF AMERICA MERRILL
LYNCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

TRADER

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14194152

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. MARY N. MULLINIX

Mailing Address 19129 HOLBERTON LANE

City

BROOKEVILLE

State

MD

Zip Code

20833-2633

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186794

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. INGEGERD I. MUNDHEIM

Mailing Address 340 E. 72ND STREET

City

NEW YORK

State

NY

Zip Code

10021-4768

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188220

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT MURADYAN

Mailing Address 6641 BRAUN CT

City

ARVADA

State

CO

Zip Code

80004-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer
SWISSLOS TRANSLOGIC

Occupation
DESIGN DRAFTSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191937

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

SAMUEL C. MURDOUGH

Mailing Address 5801 BENT PINE DR

City

VERO BEACH

State

FL

Zip Code

32967-7589

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214799

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BRIAN MURPHY

Mailing Address 11405 LOCKSHIRE DR

City

FRISCO

State

TX

Zip Code

75035-3773

FEC ID number of contributing
federal political committee.

C

Name of Employer
FOX FIRAOCIAL MAT

Occupation

STOCKBROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14189224

Amount of Each Receipt this Period

70.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEOFFREY MURPHY

Mailing Address 7871 CHESSHIRE LANE N

City

MAPLE GROVE

State

MN

Zip Code

55311-2207

FEC ID number of contributing
federal political committee.

C

Name of Employer
OLD HOME FOODS, INC.

Occupation

PRESIDENT AND C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14207591

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN MURPHY

Mailing Address 1406 CRESTWOOD DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22302-2301

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEDERAL HILL GROUP

Occupation

GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14198321

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HAYDN H. MURRAY

Mailing Address 901 S FIELDCREST CT.

City

BLOOMINGTON

State

IN

Zip Code

47401-4695

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192178

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK MURRAY

Mailing Address 649 CAMBRIDGE SE

City

GRAND RAPIDS

State

MI

Zip Code

49506-2810

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEIJER

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221947

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. STEPHANIE B. MURRAY

Mailing Address 831 STONE CANYON ROAD

City

LOS ANGELES

State

CA

Zip Code

90077-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194158

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRANK B. MYERS

Mailing Address 100 BRANDON PL.

City

WINSTON SALEM

State

NC

Zip Code

27104-1806

FEC ID number of contributing
federal political committee.

C

Name of Employer
SALEM ELECTRIC CO

Occupation

ELECTRICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223817

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ZAN A. MYERS

Mailing Address P.O. BOX 2047

City

FALLBROOK

State

CA

Zip Code

92088-2047

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226060

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

KRIS NAGEL

Mailing Address 582 WINDING BLUFF WAY

City

CLARKSVILLE

State

TN

Zip Code

37040-5760

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179936

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. SALA NASSER

Mailing Address 40 BROOKSIDE DRIVE

City

ATHENS

State

PA

Zip Code

18810-8900

FEC ID number of contributing
federal political committee.

C

Name of Employer
GUTHRIE CLINIC

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180061

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JANE A. NELSON

Mailing Address 8845 COFFMAN PATH

City

INVER GROVE

State

MN

Zip Code

55076-3393

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14201958

Amount of Each Receipt this Period

220.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. NELSON

Mailing Address 1050 20TH ST

City

CEYLON

State

MN

Zip Code

56121-1106

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198080

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 382 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS E. NELSON

Mailing Address 1901 N 73RD AVENUE

City

ELMWOOD PARK

State

IL

Zip Code

60707-3722

FEC ID number of contributing
federal political committee.

C

Name of Employer
OFFSET PRESS, INC.

Occupation

PRINTING-SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.14202487

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS E. NELSON

Mailing Address 1901 N 73RD AVENUE

City

ELMWOOD PARK

State

IL

Zip Code

60707-3722

FEC ID number of contributing
federal political committee.

C

Name of Employer
OFFSET PRESS, INC.

Occupation

PRINTING-SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	1	1

Transaction ID: SA11.14223301

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PHILIP R. NEUHAUS

Mailing Address 407 THAMER LANE
STE 2100

City

HOUSTON

State

TX

Zip Code

77024-6939

FEC ID number of contributing
federal political committee.

C

Name of Employer
WELLS FARGO SAVING

Occupation

SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	1	1

Transaction ID: SA11.14181532

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HANS NEUMAIER

Mailing Address 31 WOODBURY PL

City

ROCHESTER

State

NY

Zip Code

14618-3440

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202106

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD L. NEWACHECK

Mailing Address 819 MOUNTAIN VIEW DRIVE

City

LAFAYETTE

State

CA

Zip Code

94549-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196104

Amount of Each Receipt this Period

51.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD L. NEWACHECK

Mailing Address 819 MOUNTAIN VIEW DRIVE

City

LAFAYETTE

State

CA

Zip Code

94549-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14213987

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

491.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 384 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. SUE P. NEWELL

Mailing Address 9 ELMCOURT ST

City

SAN ANTONIO

State

TX

Zip Code

78209-2811

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.14216024

Amount of Each Receipt this Period

230.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. YVONNE NIBERT

Mailing Address 1 HORIZON POINTE LANE

City

SALEM

State

SC

Zip Code

29676-4332

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14193502

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM E. NICHOLS

Mailing Address 520 OAKLAND AVE

City

WILLIAMSPORT

State

PA

Zip Code

17701-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14206726

Amount of Each Receipt this Period

155.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

495.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 385 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JACK W. NICKLAUS

Mailing Address 11780 US HWY. 1

City

N PALM BEACH

State

FL

Zip Code

33408-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192433

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT B. NICKLES

Mailing Address 5219 PICKENS CREEK ROAD

City

HODGES

State

SC

Zip Code

29653-9654

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

FARMING TIMBER & CATTLE

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196732

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT NIEHAUS

Mailing Address 770 PARK AVENUE

City

NEW YORK

State

NY

Zip Code

10021-4153

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREENHILL COMPANY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INVESTMENT MANAGE

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194149

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. AKBAR NIKOOIE

Mailing Address 13600 SW, 103RD PLACE

City

MIAMI

State

FL

Zip Code

33176-6616

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARTRONICS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219848

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. VICTORIA NOELL

Mailing Address 97 FALCON HILLS DR

City

HIGHLANDS RANCH

State

CO

Zip Code

80126-2901

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198282

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BILL NOLAN

Mailing Address 1408 ARLES CT

City

FORT WORTH

State

TX

Zip Code

76107-3575

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202006

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3460.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 387 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES M. NOLAN

Mailing Address 8820 WALTHER BLVD BLVD APT 451

City

PARKVILLE

State

MD

Zip Code

21234-9025

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186255

Amount of Each Receipt this Period

105.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

M. L. NORFLEET

Mailing Address 2117 S MAIN ST.

City

HOPKINSVILLE

State

KY

Zip Code

42240-1791

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14202890

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TERRY NORRIS

Mailing Address 502 E BEECH ST

City

SULLIVAN

State

IN

Zip Code

47882-1347

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14207354

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

455.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HUGH O. O'BRIEN

Mailing Address 27 MYSTIC HILL RD

City

MYSTIC

State

CT

Zip Code

06355-3071

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197793

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROLAND V. OBERLIN

Mailing Address 5404 HOLLY ST

City

BELLAIRE

State

TX

Zip Code

77401-4704

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOCIETE GENERALE

Occupation
PETROLEUM ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188025

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MAUREEN OBRIEN

Mailing Address 38 CAVENDISH CIR.

City

SALEM

State

MA

Zip Code

01970-6853

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199400

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WILLIAM J. OBRIEN

Mailing Address 1240 PALMETTO PENINSULA DR.

City

MT PLEASANT

State

SC

Zip Code

29464-7452

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198554

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAY P. ODEN, JR.

Mailing Address 702 THORA BLVD.

City

SHREVEPORT

State

LA

Zip Code

71106-1824

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189725

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RAY P. ODEN, JR.

Mailing Address 702 THORA BLVD.

City

SHREVEPORT

State

LA

Zip Code

71106-1824

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14215429

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6075.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. GAIL E. OLDFATHER

Mailing Address P.O. BOX 882

City

DIABLO

State

CA

Zip Code

94528-0882

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177687

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID J. OLSEN

Mailing Address 300 BRYANT LN.

City

WOODBURY

State

TN

Zip Code

37190-1630

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177714

Amount of Each Receipt this Period

205.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. HOWARD H. OLSON

Mailing Address 609 BRISTOL PL.

City

MURRELLS INLT

State

SC

Zip Code

29576-7550

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204060

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

505.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

KATHLEEN M. ONSTAD

Mailing Address 2974 SALMON RD

City

COPPEROPOLIS

State

CA

Zip Code

95228-9569

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14186119

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

KATHLEEN M. ONSTAD

Mailing Address 2974 SALMON RD

City

COPPEROPOLIS

State

CA

Zip Code

95228-9569

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14210030

Amount of Each Receipt this Period

90.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ALEXANDER ONYIRIOHA

Mailing Address 12710 WALNUT BEND CT.

City

MISSOURI CITY

State

TX

Zip Code

77489-3912

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14203687

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH A. ORGERON

Mailing Address PO BOX 850

City

GALLIANO

State

LA

Zip Code

70354-0850

FEC ID number of contributing
federal political committee.

C

Name of Employer
MONTCO OFFSHORE, INC.

Occupation

CHIEF TECHNOLOGY OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221943

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. HERMAN ORLET

Mailing Address 3675 J DEWEY GRAY CIR

City

AUGUSTA

State

GA

Zip Code

30909-1868

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE JOSEPH M STILL BURN
CENTERS

Occupation

PLASTIC SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189331

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. JOAN D. OSBORNE

Mailing Address 128 KAAPUNI DRIVE

City

KAILUA

State

HI

Zip Code

96734-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221256

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. RICHARD C. OSTRUP

Mailing Address 2100 5TH AVE STE 200

City

SAN DIEGO

State

CA

Zip Code

92101-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEUROSURGICAL MEDICAL CLINIC, INC.

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179962

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JUDITH OTTEN

Mailing Address 122 EL CAMINO DR

City

NORFOLK

State

NE

Zip Code

68701-6704

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179629

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RICHARD C. OTTO

Mailing Address 7903 GRENOBLE LN

City

PROSPECT

State

KY

Zip Code

40059-8415

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205506

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE OVERSTREET

Mailing Address 1801 BRAEBURN DR
APT 109

City State Zip Code
SALEM VA 24153-7334

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188347

Amount of Each Receipt this Period

175.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT C. OWEN

Mailing Address 17 SUMMERSIDE

City State Zip Code
COTO DE CAZA CA 92679-4715

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORINTHIAN COLLEGES

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194166

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DAVID OWENS

Mailing Address 11923 STONEY BATTER ROAD

City State Zip Code
KINGSVILLE MD 21087-1214

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUETRON SYSTEMS, INC.

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180041

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MARK P. PACCHINI

Mailing Address 4975 WILD ROSE LN

City

LONG GROVE

State

IL

Zip Code

60047-5280

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14201999

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PHILIP K. PACKER

Mailing Address 3700 BUFFALO SPWY SUITE 1100

City

HOUSTON

State

TX

Zip Code

77098-3708

FEC ID number of contributing
federal political committee.

C

Name of Employer
HALE-MILLS CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

OWNER/VP

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207473

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. FRANK T. PADBERG

Mailing Address P.O. BOX 7418

City

LITTLE ROCK

State

AR

Zip Code

72217-7418

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190204

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOE L. PADILLA

Mailing Address 10603 BACK ORRVILLE RD

City

ORRVILLE

State

OH

Zip Code

44667-9429

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	2	/	2	0	1	1

Transaction ID: SA11.14214900

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. FRANCISCO PAGES

Mailing Address 1900 CORAL WAY

City

CORAL GABLES

State

FL

Zip Code

33145-2661

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PHYSICIAN

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	1

Transaction ID: SA11.14179961

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JACK A. PALMER

Mailing Address 26350 WOODLYN DR.

City

BONITA SPRINGS

State

FL

Zip Code

34134-5632

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	1	1

Transaction ID: SA11.14186963

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2710.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JACK A. PALMER

Mailing Address 26350 WOODLYN DR.

City

BONITA SPRINGS

State

FL

Zip Code

34134-5632

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14189869

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JACK A. PALMER

Mailing Address 26350 WOODLYN DR.

City

BONITA SPRINGS

State

FL

Zip Code

34134-5632

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194836

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JACK A. PALMER

Mailing Address 26350 WOODLYN DR.

City

BONITA SPRINGS

State

FL

Zip Code

34134-5632

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14203193

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 398 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JACK A. PALMER

Mailing Address 26350 WOODLYN DR.

City

BONITA SPRINGS

State

FL

Zip Code

34134-5632

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14209923

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN R. PALMER

Mailing Address 78 SHUEY DRIVE

City

MORAGA

State

CA

Zip Code

94556-2621

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14183101

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD PALMER

Mailing Address 30 HAZARD RD.

City

NEWPORT

State

RI

Zip Code

02840-4260

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188131

Amount of Each Receipt this Period

240.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

440.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. LEONARD B. PANAR

Mailing Address 21 BARNARD RD

City

NEW ROCHELLE

State

NY

Zip Code

10801-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213713

Amount of Each Receipt this Period

225.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SALVATORE PANTANO

Mailing Address 10256 SAGO PALM WAY

City

FORT MYERS

State

FL

Zip Code

33966-6429

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220382

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

V. W. PAOUNOFF

Mailing Address 416 NEW SWEDEN RD.

City

WOODSTOCK

State

CT

Zip Code

06281-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195795

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

665.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

V. W. PAOUNOFF

Mailing Address 416 NEW SWEDEN RD.

City

WOODSTOCK

State

CT

Zip Code

06281-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212003

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOSEPH F. PARELLA, JR.

Mailing Address 12 BRYAN AVENUE

City

MALVERN

State

PA

Zip Code

19355-3076

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182149

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOSEPH F. PARELLA, JR.

Mailing Address 12 BRYAN AVENUE

City

MALVERN

State

PA

Zip Code

19355-3076

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219422

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 401 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN C. PARKER, JR.

Mailing Address P.O. BOX 357

City

PATRICK

State

SC

Zip Code

29584-0357

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188325

Amount of Each Receipt this Period

105.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN F. PARKER

Mailing Address 1055 FOREST HILL AVE SE

City

GRAND RAPIDS

State

MI

Zip Code

49546-3626

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186828

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN F. PARKER

Mailing Address 1055 FOREST HILL AVE SE

City

GRAND RAPIDS

State

MI

Zip Code

49546-3626

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14225180

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 402 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. HENRY E. PARKS

Mailing Address 629 LOUISIANA AVE

City

BAYFIELD

State

CO

Zip Code

81122-9870

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192831

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES R. PARSONS

Mailing Address 104 RICHARD RD

City

SYRACUSE

State

NY

Zip Code

13215-1530

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARSONS & ASSOCIATES

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217876

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM G. PARZYBOK, JR.

Mailing Address 38624 N 104TH ST

City

SCOTTSDALE

State

AZ

Zip Code

85262-3711

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224616

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 403 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JERRY K. PATE

Mailing Address 5 HYDE PARK ROAD

City

PENSACOLA

State

FL

Zip Code

32503-5830

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14221945

Amount of Each Receipt this Period

30800.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MILDRED PATI

Mailing Address 217 BOOTH ST APT 436

City

GAITHERSBURG

State

MD

Zip Code

20878-5485

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186502

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DAVID M. PATRICK

Mailing Address 100 PINEWOOD DRIVE

City

HATTIESBURG

State

MS

Zip Code

39402-1452

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14193389

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

31880.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 404 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS PATRICK, JR.

Mailing Address 185 HILDRETH LANE
PO BOX 1560

City State Zip Code
BRIDGEHAMPTON NY 11932-1560

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERRILL LYNCH

Occupation
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202376

Amount of Each Receipt this Period

30800.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GERTRUD PATTERSON

Mailing Address 21314 N 80TH. LN.

City State Zip Code
PEORIA AZ 85382-4412

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184950

Amount of Each Receipt this Period

115.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENT D. PATTERSON

Mailing Address PO BOX 242225

City State Zip Code
ANCHORAGE AK 99524-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189320

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

31125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. RUTH U. PAUL

Mailing Address 556 RUSSELL AVE

City

GAITHERSBURG

State

MD

Zip Code

20877-2867

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224139

Amount of Each Receipt this Period

310.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD W. PAULL

Mailing Address 2350 INDIAN CREEK BLVD W APT D

City

VERO BEACH

State

FL

Zip Code

32966-5101

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202089

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD PAYNE

Mailing Address 6834 COLONIAL CLUB DRIVE

City

THOMASVILLE

State

NC

Zip Code

27360-5984

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208695

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

610.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 406 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN R. PAYNE

Mailing Address 725 WILLIAMS COVE DR.

City

INDIANAPOLIS

State

IN

Zip Code

46260-5342

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202054

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. NYLA R. PAYNE

Mailing Address 7250 POPLAR STREET
APT. 124

City

BOISE

State

ID

Zip Code

83704-7366

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193074

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES PECHETTE

Mailing Address 24850 PENNYROYAL DR

City

BONITA SPRINGS

State

FL

Zip Code

34134-7927

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193027

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

610.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD N. PECKHAM

Mailing Address 1111 E HOWELL AVE

City

ANAHEIM

State

CA

Zip Code

92805-6453

FEC ID number of contributing
federal political committee.

C

Name of Employer

WESTSIDE BLDG. NATL. CORP.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224180

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANKLIN E. PELLON

Mailing Address 6987 HALSTEAD AVE

City

RCH CUCAMONGA

State

CA

Zip Code

91701-5216

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181744

Amount of Each Receipt this Period

31.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRANKLIN E. PELLON

Mailing Address 6987 HALSTEAD AVE

City

RCH CUCAMONGA

State

CA

Zip Code

91701-5216

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205758

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

561.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. LEWIS S. PEMBERTON

Mailing Address 1608 BROADVIEW CIRCLE

City

OKLAHOMA CITY

State

OK

Zip Code

73127-3143

FEC ID number of contributing
federal political committee.

C

Name of Employer
MIKE JORDAN CO.Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14175438

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICARDO S. PENAFIEL

Mailing Address 143 PROSPECT ST

City

READING

State

MA

Zip Code

01867-2335

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14201983

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JAMES PEPLINSKI

Mailing Address 10812 E 20TH AVE

City

SPOKANE VALLEY

State

WA

Zip Code

99206-5625

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14185934

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1360.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MILES S. PERKINS

Mailing Address 195 LANE 275B TURKEY LK

City

HUDSON

State

IN

Zip Code

46747-9208

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14196905

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RON W. PERKINS

Mailing Address 1831 PINE ST

City

MYRTLE POINT

State

OR

Zip Code

97458-1683

FEC ID number of contributing
federal political committee.

C

Name of Employer
KINHGS COUNTY TRUCK LINEOccupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202197

Amount of Each Receipt this Period

105.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ADDIE M. PERRY

Mailing Address 865 OLD DALTON ROAD NE

City

ROME

State

GA

Zip Code

30165-9096

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14190092

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

455.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 410 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HARRY F. PERRY

Mailing Address 1153 GUINDA CT

City

CAMARILLO

State

CA

Zip Code

93010-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188370

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. BETTY D. PETERSON

Mailing Address 7972 DANTE DR

City

LITTLETON

State

CO

Zip Code

80125-1823

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183084

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BRUCE N. PETERSON

Mailing Address 6627 N 89TH ST

City

MILWAUKEE

State

WI

Zip Code

53224-5311

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209755

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

810.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. CHARLOTTE J. PETERSON

Mailing Address 11193 NE 8TH. CT.

City

BISCAYNE PARK

State

FL

Zip Code

33161-7205

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14225183

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. HELEN L. PETERSON

Mailing Address 509 MISSOURI ST.

City

SAN FRANCISCO

State

CA

Zip Code

94107-2836

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177672

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MILO PETERSON

Mailing Address 31 COBLESUB RD

City

CENTRAL SQ

State

NY

Zip Code

13036-2190

FEC ID number of contributing
federal political committee.

C

Name of Employer
MICROWAVE FILTER CO.

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193526

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ELEANOR O. PETTY

Mailing Address 202 LA JARA BLVD

City

SAN ANTONIO

State

TX

Zip Code

78209-4444

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177671

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WESLEY M. PHILLIPS

Mailing Address 1015 ROAD 25 W

City

BUSHNELL

State

NE

Zip Code

69128-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188328

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. NORMAN PHIPPS

Mailing Address 22427 VIAJES

City

SAN ANTONIO

State

TX

Zip Code

78261-2776

FEC ID number of contributing
federal political committee.

C

Name of Employer
BSG CLEARING SOULUTIONS

Occupation

C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197677

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10310.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 413 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. FREDERICK PIERCE

Mailing Address 17 HAWTHORNE WAY

City

HARTSDALE

State

NY

Zip Code

10530-3004

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

EXECUTIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188250

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FREDERICK PIERCE

Mailing Address 17 HAWTHORNE WAY

City

HARTSDALE

State

NY

Zip Code

10530-3004

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

EXECUTIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14197229

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. WILLIAM H. PIERCE

Mailing Address 200 FAIRHILLS DR

City

SAN RAFAEL

State

CA

Zip Code

94901-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14223423

Amount of Each Receipt this Period

350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. JULIE PIGGOTT

Mailing Address 703 GREYMOOR PL

City

SOUTHLAKE

State

TX

Zip Code

76092-7712

FEC ID number of contributing
federal political committee.**C**Name of Employer
BNSF RAILWAY

Occupation

VP - FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	1	1

Transaction ID: SA11.14197665

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH PIKE

Mailing Address 104 S RURAL ST.

City

HARTFORD

State

WI

Zip Code

53027-1836

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Transaction ID: SA11.14190213

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENNETH PIKE

Mailing Address 104 S RURAL ST.

City

HARTFORD

State

WI

Zip Code

53027-1836

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	1	1

Transaction ID: SA11.14210208

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. CHERYL PINE

Mailing Address 19 SCOTT CIRCLE

City

PURCHASE

State

NY

Zip Code

10577-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180057

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DICK PINER

Mailing Address 4401 PATTERSON DR.

City

NEW ORLEANS

State

LA

Zip Code

70131-1917

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196851

Amount of Each Receipt this Period

240.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. EILEEN R. PINKERTON

Mailing Address 3340 GREGORY DR W

City

BILLINGS

State

MT

Zip Code

59102-0597

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

DECORATOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198094

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 416 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. EILEEN R. PINKERTON

Mailing Address 3340 GREGORY DR W

City

BILLINGS

State

MT

Zip Code

59102-0597

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

DECORATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222653

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD PISONI

Mailing Address 630 INDIAN HILL DR.

City

HERRIN

State

IL

Zip Code

62948-4325

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180037

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PEDRO J. PIZARRO

Mailing Address 3 MACARTHUR PLACE
STE. 100

City

SANTA ANA

State

CA

Zip Code

92707-6068

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDISON MISSION GROUP

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180444

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

810.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. NEIL L. POBANZ

Mailing Address PO BOX 32

City

LACON

State

IL

Zip Code

61540-0032

FEC ID number of contributing
federal political committee.

C

Name of Employer
LACON AERO SERVICEOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	1	1

Transaction ID: SA11.14189335

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LEE P. POCHATILA

Mailing Address 7329 SHARONLEE DR

City

MENTOR

State

OH

Zip Code

44060-5745

FEC ID number of contributing
federal political committee.

C

Name of Employer
PIONEER SOLUTIONS LLCOccupation
MECH ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	1	1

Transaction ID: SA11.14191693

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. VIJAYA R. POKALA

Mailing Address 18 WATERFORD DR.

City

NACOGDOCHES

State

TX

Zip Code

75965-8705

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	1

Transaction ID: SA11.14202194

Amount of Each Receipt this Period

230.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 418 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID POLDOIAN

Mailing Address 6365 ELLENWOOD AVE

City

CLAYTON

State

MO

Zip Code

63105-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORINTHIAN COLLEGES

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194171

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DICK POLLARD

Mailing Address 6609 NORFOLK AVE

City

LUBBOCK

State

TX

Zip Code

79413-5902

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200066

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. NORENE POLLEI

Mailing Address 525 E. 2875 N.

City

PROVO

State

UT

Zip Code

84604-4236

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175454

Amount of Each Receipt this Period

310.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1560.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 419 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES POND, III

Mailing Address 8278 KINGS LANDING LN

City

SMITHFIELD

State

VA

Zip Code

23430-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14206713

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. STEVEN POPOK

Mailing Address 19 LAKE VISTA WAY

City

ORMOND BEACH

State

FL

Zip Code

32174-6762

FEC ID number of contributing
federal political committee.

C

Name of Employer
HALIFAX PATHOLOGY ASSOCIA-
TESOccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14221960

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALVIS PORTER

Mailing Address PO BOX 500

City

HOLDEN

State

WV

Zip Code

25625-0500

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14187274

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 420 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN D. PORTER, SR.

Mailing Address P.O. BOX 90159

City

ATLANTA

State

GA

Zip Code

30364-0159

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
C.P.A.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180446

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. VAL J. PORTER

Mailing Address 1161 MCNUTT XING

City

BOGART

State

GA

Zip Code

30622-2498

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224555

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ELAINE K. PORTIER

Mailing Address 15770 SW TOWHEE LN

City

BEAVERTON

State

OR

Zip Code

97007-9053

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181132

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 421 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ELAINE K. PORTIER

Mailing Address 15770 SW TOWHEE LN

City

BEAVERTON

State

OR

Zip Code

97007-9053

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	1	1

Transaction ID: SA11.14194716

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. DARLA POSTIL

Mailing Address 2445 STAFFORD RD

City

THOUSAND OAKS

State

CA

Zip Code

91361-5034

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	1	1

Transaction ID: SA11.14196240

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DARLA POSTIL

Mailing Address 2445 STAFFORD RD

City

THOUSAND OAKS

State

CA

Zip Code

91361-5034

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	1	1

Transaction ID: SA11.14223485

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 422 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT H. POTTS

Mailing Address 150 MOORINGS PARK DR # K207

City

NAPLES

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223727

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. KAREN POWELL

Mailing Address 8569 YODER ROAD

City

WADSWORTH

State

OH

Zip Code

44281-9522

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196931

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID M. POWERS

Mailing Address 130 COPPERFIELD PLACE CT.

City

WINSTON SALEM

State

NC

Zip Code

27106-3592

FEC ID number of contributing
federal political committee.

C

Name of Employer
RAI SERVICES CO

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182239

Amount of Each Receipt this Period

375.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

685.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 423 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MARGARET M. POWER

Mailing Address 609 W STRATFORD PL. APT. 2D

City

CHICAGO

State

IL

Zip Code

60657-2661

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORBOY AND DEMETRIO

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188174

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. VIRGINIA R. POWERS

Mailing Address 71 OYSTER CUT

City

VERO BEACH

State

FL

Zip Code

32963-3725

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204345

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GAYLE PRATT

Mailing Address 2585 N. FOUNTAIN ARBOR WAY

City

ORANGE

State

CA

Zip Code

92867-2061

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229232

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 424 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KENNETH A. PRATT

Mailing Address 219 W WAKEFIELD BLVD

City

WINSTED

State

CT

Zip Code

06098-2954

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208001

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. NANCY D. PRENDERGAST

Mailing Address 311 FAIRWAY DRIVE

City

GRANITEVILLE

State

SC

Zip Code

29829-4025

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194794

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

NORMA B. PRENTICE

Mailing Address 901 E CAMINO REAL APT. 9B

City

BOCA RATON

State

FL

Zip Code

33432-6345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14187844

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 425 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DOUGLAS M. PRICE

Mailing Address 12721 METCALF AVENUE
STE. 200City State Zip Code
OVERLAND PARK KS 66213-2619FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14198350

Amount of Each Receipt this Period

3750.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JONATHAN PRICE

Mailing Address 12721 METCALF AVENUE
STE. 200City State Zip Code
OVERLAND PARK KS 66213-2619FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14198344

Amount of Each Receipt this Period

3750.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENT A. PRICE

Mailing Address 12721 METCALF AVENUE
STE. 200City State Zip Code
OVERLAND PARK KS 66213-2619FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14198342

Amount of Each Receipt this Period

3750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

EDWARD PRIESS

Mailing Address 3 LARKSPUR CT.

City

ST. CHARLES

State

MO

Zip Code

63301-0627

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186504

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CAROL PRIKKEL

Mailing Address 2952 ENSLEY AVE

City

DAYTON

State

OH

Zip Code

45414-5418

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197106

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. RHONA PROVOST

Mailing Address 7050 GIUSTI RD

City

FORESTVILLE

State

CA

Zip Code

95436-9637

FEC ID number of contributing
federal political committee.

C

Name of Employer
KAISER PERMANENTEOccupation
NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197032

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MICKEY PRUITT

Mailing Address RR 1 BOX 16

City

RATLIFF CITY

State

OK

Zip Code

73481-9711

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OIL & GAS PRODUCER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219184

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. FLORENCE A. PRYBYSZ

Mailing Address 50 N 500 W

City

VALPARAISO

State

IN

Zip Code

46385-9231

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186779

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. EARL PRYOR

Mailing Address P.O. BOX 595

City

CONDON

State

OR

Zip Code

97823-0595

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199862

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DENNIS PUFFER

Mailing Address 11455 W. ATLANTIC AVE.

City

LAKEWOOD

State

CO

Zip Code

80227-1955

FEC ID number of contributing
federal political committee.

C

Name of Employer

MILLER COORS BREWING COMP-
ANY

Occupation

SENIOR EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188378

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DENNIS PUFFER

Mailing Address 11455 W. ATLANTIC AVE.

City

LAKEWOOD

State

CO

Zip Code

80227-1955

FEC ID number of contributing
federal political committee.

C

Name of Employer

MILLER COORS BREWING COMP-
ANY

Occupation

SENIOR EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214856

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PHILLIP J. PURCELL

Mailing Address 99 WARREN STREET
APARTMENT 7D

City

NEW YORK

State

NY

Zip Code

10007-1283

FEC ID number of contributing
federal political committee.

C

Name of Employer

BANK OF AMERICA

Occupation

EQUITY TRADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202379

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROGER H. PURRINGTON

Mailing Address 53 RILEY ROAD

City

FAYETTE

State

ME

Zip Code

04349-3532

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212944

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

THERESA M. PYE, JR.

Mailing Address 8725 NW 9TH PL

City

GAINESVILLE

State

FL

Zip Code

32606-7158

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175661

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES F. QUANCE

Mailing Address 15738 STEAMBOAT LANE

City

HOUSTON

State

TX

Zip Code

77079-2575

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226710

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. QUARANTA

Mailing Address 1001 G. STREET, NW #900

City

WASHINGTON

State

DC

Zip Code

20001-4545

FEC ID number of contributing
federal political committee.

C

Name of Employer
PODESTA GROUP

Occupation

GOVERNMENT AFFAIRS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189748

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN A. QUICK

Mailing Address 231 BAYVIEW STREET

City

SAN RAFAEL

State

CA

Zip Code

94901-4931

FEC ID number of contributing
federal political committee.

C

Name of Employer
WELLS FARGO

Occupation

BANKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219849

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD E. QUICK

Mailing Address 5705 PAGELAND HWY.

City

LANCASTER

State

SC

Zip Code

29720-7409

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14225873

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1710.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. JOEL RACH

Mailing Address 900 W MAIN ST

City

MONONGAHELA

State

PA

Zip Code

15063-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer
MON VALLEY UROLOGY

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187309

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JERRY RADACH

Mailing Address 5223 RIDGEVIEW DR LOOP NE

City

MOSES LAKE

State

WA

Zip Code

98837-8519

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201108

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. HOLLIS W. RADEMACHER

Mailing Address 1719 LOWELL LN.

City

LAKE FOREST

State

IL

Zip Code

60045-3784

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218732

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. CLAIRE L. RAINS

Mailing Address 420 41ST. AVE

City

SAN FRANCISCO

State

CA

Zip Code

94121-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209807

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ESTEBAN RAMOS

Mailing Address PO BOX 6955

City

LAREDO

State

TX

Zip Code

78042-6955

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198280

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES P. RANDLE

Mailing Address 2464 BEAR DEN RD

City

FREDERICK

State

MD

Zip Code

21701-9319

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179972

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1095.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. LAUREEN RAPP

Mailing Address 1000 W 11TH. ST.

City

KEARNEY

State

NE

Zip Code

68845-6502

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222180

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. RAJ REDDY

Mailing Address 440 GREENFIELD AVE
B

City

HANFORD

State

CA

Zip Code

93230-3568

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14187072

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FRANKLIN B. REDFIELD

Mailing Address 1400 CRESTON HL

City

PEACHTREE CTY

State

GA

Zip Code

30269-6635

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190190

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAUL EUGENE REDMON

Mailing Address 6707 BARTLETT RD.

City

KATY

State

TX

Zip Code

77493-8026

FEC ID number of contributing
federal political committee.

C

Name of Employer
MUSTANG ENGINEERING

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14216530

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

PAUL EUGENE REDMON

Mailing Address 6707 BARTLETT RD.

City

KATY

State

TX

Zip Code

77493-8026

FEC ID number of contributing
federal political committee.

C

Name of Employer
MUSTANG ENGINEERING

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217951

Amount of Each Receipt this Period

90.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PAUL EUGENE REDMON

Mailing Address 6707 BARTLETT RD.

City

KATY

State

TX

Zip Code

77493-8026

FEC ID number of contributing
federal political committee.

C

Name of Employer
MUSTANG ENGINEERING

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218379

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MICHELLE REEDER

Mailing Address 1440 HAVEN HILL DR

City

DAYTON

State

OH

Zip Code

45459-1550

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202053

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MAURICE J. REESE

Mailing Address 713 LAKEWOOD BLVD.

City

MADISON

State

WI

Zip Code

53704-6048

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184487

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LEONARD REID

Mailing Address P.O. BOX 8717

City

PORT SAINT LUCIE

State

FL

Zip Code

34985-8717

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188163

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. BARBARA REIDA

Mailing Address 711 EDEN TER.

City

EASTON

State

PA

Zip Code

18042-6971

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206428

Amount of Each Receipt this Period

340.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS A. REISER

Mailing Address 2020 N. MEMORIAL WAY

City

HOUSTON

State

TX

Zip Code

77007-8320

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194227

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DOYLE A. REVIS

Mailing Address 300 RED RIVER WAY

City

IRVING

State

TX

Zip Code

75063-6812

FEC ID number of contributing
federal political committee.

C

Name of Employer
H H SYSTEMS, INC

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14222828

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MARK REY

Mailing Address 4418 ALBERMARLE STREET NW

City

WASHINGTON

State

DC

Zip Code

20016-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197669

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM T. REYNOLDS

Mailing Address 2905 MARS ST.

City

RALEIGH

State

NC

Zip Code

27604-3923

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14199322

Amount of Each Receipt this Period

220.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALBERT W. RIBEIRO

Mailing Address 213 CREST AVENUE

City

HADDON HEIGHTS

State

NJ

Zip Code

08035-1418

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229236

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1720.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CLIFFORD RIBNER

Mailing Address 320 S BOSTON AVE STE 1130

City

TULSA

State

OK

Zip Code

74103-4700

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14183704

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM W. RICH

Mailing Address 3036 RIDGE VALE CIR

City

VALRICO

State

FL

Zip Code

33596-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175528

Amount of Each Receipt this Period

180.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LUNSFORD RICHARDSON, JR.

Mailing Address 7 INDIAN SPRING ROAD

City

NORWALK

State

CT

Zip Code

06853-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

SELF-EMPLOYED

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195762

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1330.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. PAUL B. RICHARDSON

Mailing Address 2898 JEFFERSON ST.

City

AUSTELL

State

GA

Zip Code

30106-3915

FEC ID number of contributing
federal political committee.

C

Name of Employer
DIGITAL LIGHTWAVE, INC.

Occupation

SALES ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14185981

Amount of Each Receipt this Period

225.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DANIEL J. RICKENMANN

Mailing Address 4203 WOODLEIGH RD.

City

COLUMBIA

State

SC

Zip Code

29206-2924

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180018

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM M. RIEGEL

Mailing Address 14 SURPLUS ST.

City

DUXBURY

State

MA

Zip Code

02332-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Transaction ID: SA11.14222130

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH RILEY

Mailing Address 4 WESTBURY RD

City

LUTHERVILLE TIMONI

State

MD

Zip Code

21093-5536

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERCY MED.CTR.

Occupation
NURSE/RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188871

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH RILEY

Mailing Address 4 WESTBURY RD

City

LUTHERVILLE TIMONI

State

MD

Zip Code

21093-5536

FEC ID number of contributing
federal political committee.

C

Name of Employer
MERCY MED.CTR.

Occupation
NURSE/RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211132

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

J. RINEHART JR

Mailing Address 4487 DEER RUN

City

ROCK HILL

State

SC

Zip Code

29732-9258

FEC ID number of contributing
federal political committee.

C

Name of Employer
RINEHART REALTY CORPORATI-
ON

Occupation
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14178077

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. SUSANA RIOS

Mailing Address 1099 22ND ST NW

City

WASHINGTON

State

DC

Zip Code

20037-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198389

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT L. RITER

Mailing Address 3 HILLBURN CT

City

NORTH BARRINGTON

State

IL

Zip Code

60010-6927

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14215539

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RITA E. ROBBINS

Mailing Address 1615 S CLARK RD

City

MARKLE

State

IN

Zip Code

46770-9072

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179979

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ARTHUR R. ROBERTS

Mailing Address 3202 WESTGATE LN

City

RICHARDSON

State

TX

Zip Code

75082-3114

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183102

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHRIS A. ROBERTS

Mailing Address 13 HUNTERS RIDGE LN

City

TROPHY CLUB

State

TX

Zip Code

76262-5619

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197664

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CORBIN J. ROBERTSON, JR.

Mailing Address 601 JEFFERSON STREET
STE. 3600

City

HOUSTON

State

TX

Zip Code

77002-7906

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUINTANA MINERALS CORPORA-
TION

Occupation
PRESIDENT AND C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194214

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ANNE ROBINSON

Mailing Address 170 CHEROKEE ROAD

City

CHARLOTTE

State

NC

Zip Code

28207-1904

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185341

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GARY E. ROBINSON

Mailing Address 202 CENTER AVE

City

OOSTBURG

State

WI

Zip Code

53070-1482

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183628

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GARY E. ROBINSON

Mailing Address 202 CENTER AVE

City

OOSTBURG

State

WI

Zip Code

53070-1482

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188116

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LEONARD D. ROBINSON

Mailing Address P.O. BOX 717

City

W SACRAMENTO

State

CA

Zip Code

95691-0717

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217414

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM ROBINSON

Mailing Address 3630 CHERBOURG WAY

City

MARIETTA

State

GA

Zip Code

30062-4289

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219716

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM A. ROBINSON

Mailing Address 755 BAYWOOD DRIVE
STE. 180

City

PETALUMA

State

CA

Zip Code

94954-5509

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

SELF-EMPLOYED

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194174

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 445 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MR. JAMES F. ROBSON

Mailing Address PO BOX 21901
1

City State Zip Code
PHILADELPHIA PA 19124

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221275

Amount of Each Receipt this Period

125.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
TOM ROCKWOOD

Mailing Address 4018 KILMARTIN DRIVE

City State Zip Code
TALLAHASSEE FL 32309-2874

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196685

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. EVERETT G. ROEHL

Mailing Address 11574 N GALVIN AVE
PO BOX 750

City State Zip Code
MARSHFIELD WI 54449-8518

FEC ID number of contributing
federal political committee.

C

Name of Employer
RACHL TRANSPORT INC

Occupation
TRUCKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178615

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

395.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 446 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. EVERETT G. ROEHL

Mailing Address 11574 N GALVIN AVE
PO BOX 750

City	State	Zip Code
MARSHFIELD	WI	54449-8518

FEC ID number of contributing
federal political committee.

C

Name of Employer
RACHL TRANSPORT INCOccupation
TRUCKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14214959

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LAWRENCE ROEL

Mailing Address 131 CRAGMOOR DR.

City	State	Zip Code
ROEBUCK	SC	29376-3508

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITAL ACQUISITONOccupation
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192940

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PETER ROGERS, JR.

Mailing Address 11865 BRIGHT PASSAGE

City	State	Zip Code
COLUMBIA	MD	21044-4369

FEC ID number of contributing
federal political committee.

C

Name of Employer
MICROS SYSTEMS INCOccupation
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14196096

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 447 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MATTHEW ROSE

Mailing Address 1110 POST OAK PLACE

City

WESTLAKE

State

TX

Zip Code

76262-9013

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF RAILWAY COMPANY

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14216157

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DEAN ROSEN

Mailing Address 139 11TH STREET, NE

City

WASHINGTON

State

DC

Zip Code

20002-6243

FEC ID number of contributing
federal political committee.

C

Name of Employer
MEHLMAN VOGEL CASTAGNETTI

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	1

Transaction ID: SA11.14189297

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. PHYLLIS ROSEN

Mailing Address 126 EAST 56TH STREET
24TH FLOOR

City

NEW YORK

State

NY

Zip Code

10022-3613

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14219847

Amount of Each Receipt this Period

20000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

26500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THOMAS ROST

Mailing Address 827 SW TOPEKA BLVD

City

TOPEKA

State

KS

Zip Code

66612

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROST & ROST

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180054

Amount of Each Receipt this Period

175.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. NANCY B. ROTH

Mailing Address 8545 CARMEL VALLEY RD

City

CARMEL

State

CA

Zip Code

93923-9556

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208495

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BURTON W. ROUNDS

Mailing Address 122 96TH. AVE W

City

DULUTH

State

MN

Zip Code

55808-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14225628

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RONALD T. ROUNDTREE

Mailing Address 210 TRACE COLONY PARK DRIVE

City

RIDGELAND

State

MS

Zip Code

39157

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192765

Amount of Each Receipt this Period

750.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. SUE ROUX

Mailing Address 33844 UPPER BEAR CREEK RD

City

EVERGREEN

State

CO

Zip Code

80439-7810

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201247

Amount of Each Receipt this Period

205.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WALTER ROZIER

Mailing Address 1608 SW JEFFERSON ST.

City

LEES SUMMIT

State

MO

Zip Code

64081-3106

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ELECTRICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202060

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1155.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 450 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

STANLEY RUMBOUGH, JR.

Mailing Address 44 COCOANUT ROW

City

PALM BEACH

State

FL

Zip Code

33480-4069

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14221406

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MARY L. RUSENCRAZ

Mailing Address 186 JERRY BROWNE RD UNIT 1408

City

MYSTIC

State

CT

Zip Code

06355-4007

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14185142

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN R. RUSSELL

Mailing Address 230 DWYER AVENUE
UNIT 201

City

SAN ANTONIO

State

TX

Zip Code

78204-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14194151

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5660.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 451 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. LELA C. RUSSELL

Mailing Address 2901 S BAYSHORE DR
APT 5B

City	State	Zip Code
MIAMI	FL	33133-6001

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14201990

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. SHAREN RUSSELL

Mailing Address 1651 WILSON AVE

City	State	Zip Code
CHESTERFIELD	MO	63005-4536

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180142

Amount of Each Receipt this Period

330.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. JOSEPH A. RUSSOTTO

Mailing Address 408 MIDLOTHIAN SQ.

City	State	Zip Code
HAMPTON	VA	23669-1747

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14200473

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1405.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 452 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES J. RYAN

Mailing Address 5316 CLEVES WARSAW PIKE

City

CINCINNATI

State

OH

Zip Code

45238-3602

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192863

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARA LETICA SAAD

Mailing Address 1292 CIRCLE COURT

City

BLOOMFIELD HILLS

State

MI

Zip Code

48302-0817

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14216156

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JACK L. SAINÉ

Mailing Address 2230 OAKLAND PKWY.

City

LIMA

State

OH

Zip Code

45805-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201261

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 453 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE J. SAKALDASIS

Mailing Address 1379 LYON CT.

City

LIVERMORE

State

CA

Zip Code

94551-1952

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAWRENCE LIVERMORE NAT.
LAB

Occupation

EXECUTIVE STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14210065

Amount of Each Receipt this Period

65.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SCOTT SALMANS

Mailing Address 282 CROSS CREEK RD.

City

MC GREGOR

State

TX

Zip Code

76657-9511

FEC ID number of contributing
federal political committee.

C

Name of Employer
WR GROUP LTD.

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191464

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

IGNACIO SANCHEZ

Mailing Address 11525 LAKE POTOMAC DRIVE

City

POTOMAC

State

MD

Zip Code

20854-1220

FEC ID number of contributing
federal political committee.

C

Name of Employer
DLA PIPER

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189709

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 454 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. PETER K. SAND

Mailing Address 1000 CENTRAL ST STE 730

City

EVANSTON

State

IL

Zip Code

60201-1779

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198244

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NESTOR J. SANDER

Mailing Address 1916 TEMESCAL DR

City

MODESTO

State

CA

Zip Code

95355-9171

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208032

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. NESTOR J. SANDER

Mailing Address 1916 TEMESCAL DR

City

MODESTO

State

CA

Zip Code

95355-9171

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222594

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 455 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHARLES W. SANDFORD

Mailing Address 1910 FOREST GARDEN DR

City

KINGWOOD

State

TX

Zip Code

77345-1625

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14175529

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. BRIJ SARAN

Mailing Address 17 WOODSHIRE CT.

City

BALLSTON LAKE

State

NY

Zip Code

12019-1229

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

SELF-EMPLOYED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188270

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

KARIN SATRUM

Mailing Address 9751 S HWY 211

City

CANBY

State

OR

Zip Code

97013-9538

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILLAMETTE EGG FARM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CLERICAL

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14206736

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

440.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 456 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ANTONIO L. SAVOCA

Mailing Address 7971 VALDERRAMA CT.

City

GAINESVILLE

State

VA

Zip Code

20155-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14210200

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALLAN W. SAWTELLE

Mailing Address 11120 SPRINGFIELD PIKE APT A40

City

CINCINNATI

State

OH

Zip Code

45246-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14199192

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. SAXON

Mailing Address 514 BROOKSTONE CT

City

COPLEY

State

OH

Zip Code

44321-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSIOccupation
C.O.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14199149

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 457 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL J. SAXON

Mailing Address 514 BROOKSTONE CT

City

COPLEY

State

OH

Zip Code

44321-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSIOccupation
C.O.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Transaction ID: SA11.14222221

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

STEPHEN SCANLON

Mailing Address 9 VAN CT

City

WALDWICK

State

NJ

Zip Code

07463-1614

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14224541

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN SCARBOROUGH

Mailing Address 6341 N. 11TH STREET

City

FRESNO

State

CA

Zip Code

93710-5706

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14202383

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 458 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ELIZABETH F. SCHAFER

Mailing Address 736 CRESCENT RD

City

JACKSON

State

MI

Zip Code

49203-3965

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199710

Amount of Each Receipt this Period

600.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. P. SCHELKUN

Mailing Address 158 YORK RD

City

WARMINSTER

State

PA

Zip Code

18974-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer
DR SCHWARTZ & DR SCHELKUN
ASSOCIATES

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179960

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JANET L. SCHEUERMAN

Mailing Address 1808 WOODMERE DR E

City

VALPARAISO

State

IN

Zip Code

46383-1645

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191736

Amount of Each Receipt this Period

105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 459 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

P J. SCHIERL

Mailing Address 1815 RAINBOW AVE

City

DE PERE

State

WI

Zip Code

54115-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210832

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH J. SCHMITT

Mailing Address P.O. BOX 2753

City

AQUEBOGUE

State

NY

Zip Code

11931-2753

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195774

Amount of Each Receipt this Period

55.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RALPH G. SCHMITT

Mailing Address 182 BURNT HICKORY WAY

City

FORTSON

State

GA

Zip Code

31808-4468

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200383

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

605.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 460 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RALPH G. SCHMITT

Mailing Address 182 BURNT HICKORY WAY

City

FORTSON

State

GA

Zip Code

31808-4468

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211728

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD SCHMID

Mailing Address 11782 LOMA LINDA WAY

City

SANTA ANA

State

CA

Zip Code

92705-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer
SURCHSTRMA & SCHMID

Occupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207357

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN SCHMOEGER

Mailing Address 35932 BLANK RD.

City

RUSSELLVILLE

State

MO

Zip Code

65074-2938

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185371

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. EDWARD J. SCHNEIDER

Mailing Address 3039 CANYON VIEW CT

City

WALLA WALLA

State

WA

Zip Code

99362-8878

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192385

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. CAROLYN SCHNOSE

Mailing Address 12685 MAITLAND RD

City

HOT SPRINGS

State

SD

Zip Code

57747-7311

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
RANCHERS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14177858

Amount of Each Receipt this Period

90.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CRAIG D. SCHNUCK

Mailing Address 26 CARRSWOLD DRIVE

City

SAINT LOUIS

State

MO

Zip Code

63105-2913

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3244.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14194145

Amount of Each Receipt this Period

3244.66

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3534.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 462 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARILYN A. SCHNUCK

Mailing Address 131 LINDEN AVENUE

City

SAINT LOUIS

State

MO

Zip Code

63105-3839

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1743.93

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194143

Amount of Each Receipt this Period

1743.93

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MARK J. SCHNUCK

Mailing Address 201 S MCKNIGHT ROAD
APT. 1201

City

SAINT LOUIS

State

MO

Zip Code

63124-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3244.66

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194147

Amount of Each Receipt this Period

3244.66

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. SCOTT C. SCHNUCK

Mailing Address 15 UPPER LADUE ROAD

City

SAINT LOUIS

State

MO

Zip Code

63124-1675

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3244.66

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194148

Amount of Each Receipt this Period

3244.66

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8233.25

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 463 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. TERRY E. SCHNUCK

Mailing Address 237 LINDEN AVENUE

City

SAINT LOUIS

State

MO

Zip Code

63105-3841

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3244.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14194146

Amount of Each Receipt this Period

3244.66

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TODD R. SCHNUCK

Mailing Address 9752 LITZSINGER ROAD

City

SAINT LOUIS

State

MO

Zip Code

63124-1058

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14194154

Amount of Each Receipt this Period

3245.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. EDITH SCHOCKLIN

Mailing Address 5322 MARSH LANDING LANE

City

SUFFOLK

State

VA

Zip Code

23435-4214

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14179947

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

6699.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM O. SCHOEDINGER

Mailing Address 7501 E THOMPSON PEAK PKWY
UNIT 216

City State Zip Code
SCOTTSDALE AZ 85255-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218417

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. JANICE L. SCHONFELD

Mailing Address 30312 GOLF CLUB DR

City State Zip Code
SAN JUAN CAPO CA 92675-5414

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175477

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PHILIP G. SCHONER

Mailing Address 107 COLSTON PL

City State Zip Code
LEXINGTON VA 24450-1811

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179994

Amount of Each Receipt this Period

105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

605.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 465 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GLENN L. SCHRADER

Mailing Address 7590 OAKMONT DRIVE

City

SANTA ROSA

State

CA

Zip Code

95409-6499

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183333

Amount of Each Receipt this Period

70.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROGER SCHUBLOM

Mailing Address 2055 SIERRA DR

City

ELKO

State

NV

Zip Code

89801-4504

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221753

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GERRI SCHULTZ

Mailing Address 3002 BERTOLLI DR

City

LIVERMORE

State

CA

Zip Code

94550-9694

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223213

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

445.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 466 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RUSSELL D. SCHULTZ

Mailing Address P.O. BOX 199

City

MICHIGANTOWN

State

IN

Zip Code

46057-0199

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196726

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RUSSELL D. SCHULTZ

Mailing Address P.O. BOX 199

City

MICHIGANTOWN

State

IN

Zip Code

46057-0199

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224730

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN N. SCIOTTO

Mailing Address 660 VALERIE DR.

City

NEWTOWN SQ

State

PA

Zip Code

19073-1516

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207275

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 467 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CALVIN W. SCOTT

Mailing Address 4504 KINGSWICK DR

City

ARLINGTON

State

TX

Zip Code

76016-2347

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192389

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. JANET L. SCOTT

Mailing Address 695 RIVER OAKS DR

City

HAYESVILLE

State

NC

Zip Code

28904-7811

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180038

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JOHN K. SCOTT

Mailing Address 83 PARKWOOD DR

City

COLCHESTER

State

VT

Zip Code

05446-6293

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202268

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

KENNETH E. SCOTT

Mailing Address 610 GERONA RD

City

STANFORD

State

CA

Zip Code

94305-8453

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218411

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. MATTHEW R. SCOTT

Mailing Address TWO 14TH STREET
APT. 932

City

HOBOKEN

State

NJ

Zip Code

07030-6779

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF AMERICA MERRILL
LYNCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

TRADER

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189710

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. CHARLES L. SCRIVNER

Mailing Address 116 LACY RD

City

INDEPENDENCE

State

MO

Zip Code

64050-2220

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184979

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOSEPH T. SCUDERI

Mailing Address 5074 REIS CIR.

City

FAYETTEVILLE

State

NY

Zip Code

13066-9300

FEC ID number of contributing
federal political committee.

C

Name of Employer
MILLE WALER GROUP

Occupation

REAL ESTATE DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218393

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. AVERY SEAMAN, JR.

Mailing Address 88 NIAHTIC AVE.

City

PROVIDENCE

State

RI

Zip Code

02907-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORP. BROTHERS INC.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14183710

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM H. SEAMAN

Mailing Address 7328 FORBES AVE

City

LAKE BALBOA

State

CA

Zip Code

91406-2737

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195597

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. LEE E. SEAR

Mailing Address 805 RUE ROYAL

City

METAIRIE

State

LA

Zip Code

70005-3465

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201233

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN P. SEDLAK

Mailing Address 31750 FAIRMOUNT BLVD

City

CLEVELAND

State

OH

Zip Code

44124-4813

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14185259

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM E. SENN

Mailing Address 314 KENTUCKY AVENUE SE

City

WASHINGTON

State

DC

Zip Code

20003-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer
VERIZON

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194220

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CARL G. SENSENIG

Mailing Address 1015 STEINMETZ ROAD

City

DENVER

State

PA

Zip Code

17517-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14183706

Amount of Each Receipt this Period

55.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD C. SEVERTSON

Mailing Address 13628 PILOT KNOB RD

City

APPLE VALLEY

State

MN

Zip Code

55124-8619

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186254

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD C. SEVERTSON

Mailing Address 13628 PILOT KNOB RD

City

APPLE VALLEY

State

MN

Zip Code

55124-8619

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14187113

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DONALD C. SEVERTSON

Mailing Address 13628 PILOT KNOB RD

City

APPLE VALLEY

State

MN

Zip Code

55124-8619

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219271

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DONALD C. SEVERTSON

Mailing Address 13628 PILOT KNOB RD

City

APPLE VALLEY

State

MN

Zip Code

55124-8619

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14223533

Amount of Each Receipt this Period

30.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD C. SEVERTSON

Mailing Address 13628 PILOT KNOB RD

City

APPLE VALLEY

State

MN

Zip Code

55124-8619

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226765

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. RICHARD W. SHAFFER

Mailing Address 82751 BOSTON CT.

City

INDIO

State

CA

Zip Code

92201-5909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182084

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD W. SHAFFER

Mailing Address 82751 BOSTON CT.

City

INDIO

State

CA

Zip Code

92201-5909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202483

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD W. SHAFFER

Mailing Address 82751 BOSTON CT.

City

INDIO

State

CA

Zip Code

92201-5909

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205753

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. REBECCA A. SHALE

Mailing Address 1104 CHRISTI CIRCLE

City

DAYTON

State

OH

Zip Code

45434-6376

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOLZFUBER, CECIL, MCKNIGHT
& MOSS

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201081

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAMES W. SHANNON, JR.

Mailing Address 331 BARBARA WAY

City

HILLSBOROUGH

State

CA

Zip Code

94010-6761

FEC ID number of contributing
federal political committee.

C

Name of Employer
BECHTEL GROUP

Occupation
SENIOR V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221942

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DAVID SHARBUTT

Mailing Address 4621 91ST STREET

City

LUBBOCK

State

TX

Zip Code

79424-5035

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198347

Amount of Each Receipt this Period

30800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

31860.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 475 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. PAUL M. SHATTUCK

Mailing Address 2241 S CREST ST

City

WICHITA

State

KS

Zip Code

67207-6323

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEPARTMENT OF DEFENSE

Occupation

AIRCRAFT MAINTAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187315

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ALAN D. SHAUERS

Mailing Address 15398 FLOWERGATE WAY

City

PARKER

State

CO

Zip Code

80134-3706

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROONEY ENGINEERING

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175510

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD H. SHELLEY

Mailing Address 4100 ARBOR GREEN WAY
APT A

City

NEW BERN

State

NC

Zip Code

28562

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188376

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 476 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ESTHER SHERWOOD

Mailing Address 175 N GIRARD ST. APT. 103

City

HEMET

State

CA

Zip Code

92544-4650

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14199610

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RANDY M. SHERWOOD

Mailing Address 16904 S DALTON AVE

City

GARDENA

State

CA

Zip Code

90247-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer
FARMER BROTHERS

Occupation
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14187301

Amount of Each Receipt this Period

120.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CHARLES W. SHEWMAKE

Mailing Address 4938 WESTBRIAR DRIVE

City

FT. WORTH

State

TX

Zip Code

76109-3127

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF RAILWAY

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197675

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 477 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. ELEANOR SHOWERS

Mailing Address 1486 NESBITT RD.

City

CALEDONIA

State

OH

Zip Code

43314-9475

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14180873

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT H. SHRADER

Mailing Address 9333 ROLLING CIRCLE

City

SAN ANTONIO

State

FL

Zip Code

33576-4651

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200697

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. RICHARD H. SHUTTE

Mailing Address 3842 GRANT AVE

City

DAYTON

State

OH

Zip Code

45431-1598

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181527

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. RICHARD H. SHUTTE

Mailing Address 3842 GRANT AVE

City

DAYTON

State

OH

Zip Code

45431-1598

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14182718

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. RICHARD H. SHUTTE

Mailing Address 3842 GRANT AVE

City

DAYTON

State

OH

Zip Code

45431-1598

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14200232

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT SHUTTS

Mailing Address 2010 BRANDYWINE DR

City

WINTER PARK

State

FL

Zip Code

32789-6111

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14200153

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LT. COL. WILLIAM H. SIBLEY

Mailing Address 3204 REED DR.

City

BELLEVUE

State

NE

Zip Code

68005-3964

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14184366

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LT. COL. WILLIAM H. SIBLEY

Mailing Address 3204 REED DR.

City

BELLEVUE

State

NE

Zip Code

68005-3964

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14193131

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LT. COL. WILLIAM H. SIBLEY

Mailing Address 3204 REED DR.

City

BELLEVUE

State

NE

Zip Code

68005-3964

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14196864

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LT. COL. WILLIAM H. SIBLEY

Mailing Address 3204 REED DR.

City

BELLEVUE

State

NE

Zip Code

68005-3964

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206521

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LT. COL. WILLIAM H. SIBLEY

Mailing Address 3204 REED DR.

City

BELLEVUE

State

NE

Zip Code

68005-3964

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220717

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LT. COL. WILLIAM H. SIBLEY

Mailing Address 3204 REED DR.

City

BELLEVUE

State

NE

Zip Code

68005-3964

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222199

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 481 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LON SIMMONS

Mailing Address 10 WAILEA EKOLU PL. APT. 1707

City

KIHEI

State

HI

Zip Code

96753-9505

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14206548

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ALICE B. SIMONSON

Mailing Address PO BOX 512

City

WATFORD CITY

State

ND

Zip Code

58854-0512

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14189336

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALLEN H. SIMON

Mailing Address 1383 N CRISS ST

City

CHANDLER

State

AZ

Zip Code

85226-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.14216232

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL SIMON

Mailing Address 2 BROOK WAY

City

WEST ORANGE

State

NJ

Zip Code

07052-4919

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202374

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. NICHOLAS X. SIMON

Mailing Address 100 FRANK E SIMON AVENUE

City

SHEPHERDSVILLE

State

KY

Zip Code

40165-6013

FEC ID number of contributing
federal political committee.

C

Name of Employer
PUBLISHERS PRESS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202372

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. EMMA J. SIMS

Mailing Address 1003 SOMERSET DR UNITA

City

GLEN BURNIE

State

MD

Zip Code

21061-4017

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186591

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. PETER W. SINNEMA

Mailing Address 16801 BRADGATE AVENUE

City

CLEVELAND

State

OH

Zip Code

44111-4251

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196466

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PETER W. SINNEMA

Mailing Address 16801 BRADGATE AVENUE

City

CLEVELAND

State

OH

Zip Code

44111-4251

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224611

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. FAYE J. SITZMANN

Mailing Address 2182 EDGCUMBE RD.

City

SAINT PAUL

State

MN

Zip Code

55116-2475

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193024

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GARY T. SKELLY

Mailing Address 415 MANSION AVE.

City

OGDENSBURG

State

NY

Zip Code

13669-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14207820

Amount of Each Receipt this Period

220.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM H. SKIPPER, JR.

Mailing Address 2625 SLEDDING HILL ROAD

City

VIENNA

State

VA

Zip Code

22124-1541

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN BUSINESS DEVELOP-
MENT GRP.Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14189701

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LAURA SLACK

Mailing Address 1602 MATTHEW LN

City

MARION

State

IL

Zip Code

62959-3722

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14177688

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5330.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. TERRY SLAYMAKER

Mailing Address 87389 472ND AVE

City

ATKINSON

State

NE

Zip Code

68713-4835

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Transaction ID: SA11.14188732

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. VINCENT P. SMALL

Mailing Address 864 BOX HILL LN

City

WAYNE

State

PA

Zip Code

19087-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	1

Transaction ID: SA11.14201961

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MICHAEL SMEDLEY

Mailing Address 703 BERKSHIRE DR

City

PRINCETON

State

NJ

Zip Code

08540-9461

FEC ID number of contributing
federal political committee.

C

Name of Employer
MID-ATLANTIC INDUSTRIAL
SERVICES CORP.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CONTRACTOR

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	1	1

Transaction ID: SA11.14219822

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

860.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAN E.G. SMIT

Mailing Address 1475 NORTH REFUGIO RD. P.O. BOX 12

City State Zip Code
 SANTA YNEZ CA 93460

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188123

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. AGNES T. SMITH

Mailing Address P.O. BOX 537

City State Zip Code
 NORTHWOOD ND 58267-0537

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14187697

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. AMY SMITH

Mailing Address 845 UPPER PINE CREEK RD

City State Zip Code
 CHESTER SPRINGS PA 19425-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMCAST

Occupation
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202422

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ANN SMITH

Mailing Address 316 CHESTNUT ST NW

City

HARTSELLE

State

AL

Zip Code

35640-2406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203916

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ANN SMITH

Mailing Address 316 CHESTNUT ST NW

City

HARTSELLE

State

AL

Zip Code

35640-2406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203949

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. CHARCEY SMITH

Mailing Address 532 OAK GROVE RD

City

ROGERSVILLE

State

TN

Zip Code

37857-3456

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184192

Amount of Each Receipt this Period

10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES D. SMITH

Mailing Address 534 TRAILRIDGE DR.

City

BONITA

State

CA

Zip Code

91902-4065

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198475

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CHARLES J. SMITH

Mailing Address 1605 FULHAM ST

City

SAINT PAUL

State

MN

Zip Code

55108-1313

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14183151

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DENIS J. SMITH

Mailing Address 1308 CHATSWORTH COURT E.

City

COLLEYVILLE

State

TX

Zip Code

76034-4273

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF

Occupation
VP - MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194207

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. F. RANDALL SMITH, JR.

Mailing Address 325 E. 53RD STREET

City

NEW YORK

State

NY

Zip Code

10022-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITAL COUNSEL

Occupation

INVESTMENT ADVISER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	1	1

Transaction ID: SA11.14194210

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

HOWARD L. SMITH, M.D.

Mailing Address 2904 DIAMOND A DR.

City

ROSWELL

State

NM

Zip Code

88201-3417

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	1	1

Transaction ID: SA11.14196301

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARK D. SMITH

Mailing Address 90 LANDER LN

City

BERRYVILLE

State

VA

Zip Code

22611-3311

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	1	1

Transaction ID: SA11.14191705

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NANCY E. SMITH

Mailing Address 3350 N KEY DR
APT B713

City State Zip Code
FORT MYERS FL 33903-4886

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224460

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. RENEE R. SMITH

Mailing Address 3105 WARRENWOOD WYND

City State Zip Code
LEXINGTON KY 40502-3529

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194376

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD R. SMITH

Mailing Address P.O. BOX 1265

City State Zip Code
HENDERSON TX 75653-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRESIDENT AND C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212000

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT SMITH

Mailing Address 900 W ALPINE WAY APT. 107

City

SHELTON

State

WA

Zip Code

98584-1217

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14199321

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. CHEVES M. SMYTHE

Mailing Address 219 STONEY CREEK DR.

City

HOUSTON

State

TX

Zip Code

77024-6247

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNITED HEALTH SERVICES CE-
NTEROccupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14199397

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES T. SMYTHE

Mailing Address 511 E. MAIN STREET

City

MURFREESBORO

State

TN

Zip Code

37130-3938

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14195415

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 492 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MARSHALL R. SNYDER

Mailing Address 19082 WHITE BLUFF DR

City

WHITNEY

State

TX

Zip Code

76692-5643

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219227

Amount of Each Receipt this Period

410.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. URBAN H. SOMMERS

Mailing Address 17902 WILDWOOD RD.

City

CARLYLE

State

IL

Zip Code

62231-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197251

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. HARRIETT R. SOSELY

Mailing Address 604 FAIRVIEW AVE

City

MIDDLESEX

State

NJ

Zip Code

08846-2327

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14178062

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

670.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 493 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. HARRIETT R. SOSELY

Mailing Address 604 FAIRVIEW AVE

City

MIDDLESEX

State

NJ

Zip Code

08846-2327

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14183690

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TIMOTHY S. SOTOS

Mailing Address 4950 CENTRAL STREET

City

KANSAS CITY

State

MO

Zip Code

64112-2423

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Transaction ID: SA11.14198345

Amount of Each Receipt this Period

15400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ALI M. SOUDJANI

Mailing Address 13118 BERRY KNOLL LANE

City

HOUSTON

State

TX

Zip Code

77079-3605

FEC ID number of contributing
federal political committee.

C

Name of Employer
APPLE FINANCE CO.Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14197666

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

20600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GINO SOVRAN

Mailing Address 2669 CHESWICK DR

City

TROY

State

MI

Zip Code

48084-1069

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188908

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

KEN SPAIN

Mailing Address 322 SOUTH CAROLINA AVE SE

City

WASHINGTON

State

DC

Zip Code

20003-4223

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRIVATE EQUITY GROWTH CAP-
ITAL COUNCIL

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198391

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DEBORAH J. SPANO

Mailing Address 55597 MONROE DR

City

SHELBY TOWNSHIP

State

MI

Zip Code

48316-1136

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14193927

Amount of Each Receipt this Period

210.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 495 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR ROBERT J. SPARKS

Mailing Address 5826 N DELAWARE ST

City

INDIANAPOLIS

State

IN

Zip Code

46220-2530

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191690

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MILDRED B. SPIELMAN

Mailing Address 21 DELICIOUS CT.

City

MARTINSBURG

State

WV

Zip Code

25403-1477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205589

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

SUZANNE SPIKE

Mailing Address 6150 SUNPATTERNS TRL

City

FAIRFAX STA

State

VA

Zip Code

22039-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220904

Amount of Each Receipt this Period

225.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

405.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 496 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOE R. SPIVEY

Mailing Address P.O. BOX 2421

City

PARADISE

State

CA

Zip Code

95967-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213380

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS A. SPRENGER

Mailing Address 12500 WILDCAT COVE CIR

City

ESTERO

State

FL

Zip Code

33928-2088

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219726

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. MARY A. SPRINGER

Mailing Address 235 S BEACH BLVD SPC 104

City

ANAHEIM

State

CA

Zip Code

92804-1824

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181079

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 497 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. KALYANA R. SRINIVASAN

Mailing Address 11828 NE 41ST LN

City

KIRKLAND

State

WA

Zip Code

98033-8754

FEC ID number of contributing
federal political committee.

C

Name of Employer
HARLAND CLARKE HOLDINGS
CORPOccupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14189707

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ORSON L. ST. JOHN, JR.

Mailing Address P.O. BOX 295

City

NORTH POMFRET

State

VT

Zip Code

05053-0295

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188236

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RALPH ST. JOHN

Mailing Address 12736 NORTHERN BLVD

City

FLUSHING

State

NY

Zip Code

11368-1520

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14188453

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. DIANA L. STAAB

Mailing Address 6817 DOMINION LN

City

LAKEWOOD RANCH

State

FL

Zip Code

34202-5027

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209801

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. BARBARA K. STAHLSCHMIDT

Mailing Address 2709 ESPANOLA AVE

City

SARASOTA

State

FL

Zip Code

34239-4922

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188588

Amount of Each Receipt this Period

70.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. BARBARA K. STAHLSCHMIDT

Mailing Address 2709 ESPANOLA AVE

City

SARASOTA

State

FL

Zip Code

34239-4922

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189522

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 499 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRANK L. STANLEY

Mailing Address 150 BARBOURTOWN RD.

City

COLLINSVILLE

State

CT

Zip Code

06019-3704

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188478

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JOHN W. STANLEY, JR.

Mailing Address 5038 HUNTING HILLS SQ.

City

ROANOKE

State

VA

Zip Code

24018-8768

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192204

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. MICHAEL D. STANTON-HICKS

Mailing Address 11405 CLEARFIELD LN.

City

CHARDON

State

OH

Zip Code

44024-9051

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
VICE CHAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14207728

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 500 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

R. STARRAK

Mailing Address 7133 US HIGHWAY 84

City

COLEMAN

State

TX

Zip Code

76834-8327

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14181382

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID H. STASHIK

Mailing Address 1507 EDITH STREET

City

BERKELEY

State

CA

Zip Code

94703-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14187577

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GEORGE W. STATHOPOULOS

Mailing Address 22W435 AHLSTRAND RD.

City

GLEN ELLYN

State

IL

Zip Code

60137-7152

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14202198

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CHARLES E. STEBER

Mailing Address 2067 MASON MILL RD

City

DECATUR

State

GA

Zip Code

30033-4009

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192961

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. TRENT STEDMAN

Mailing Address 487 WEST ROAD

City

NEW CANAAN

State

CT

Zip Code

06840-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INVESTOR

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14197660

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ANN M. STEFFENHAGEN

Mailing Address 28264 N GILMER RD

City

MUNDELEIN

State

IL

Zip Code

60060-9538

FEC ID number of contributing
federal political committee.

C

Name of Employer
NO ILMACK INC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CLERICAL

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186783

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JEFFREY STEINKAMP

Mailing Address GREAT HAWK ROAD P.O. BOX 98

City

ROCHESTER

State

VT

Zip Code

05767-0098

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192857

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LAURA STEINER

Mailing Address 2726 ALDERWOOD AVE

City

BELLINGHAM

State

WA

Zip Code

98225-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192486

Amount of Each Receipt this Period

600.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. BRIAN E. STENGEL

Mailing Address 22 OVAL AVENUE

City

RIVERSIDE

State

CT

Zip Code

06878-2128

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229234

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WARREN A. STEPHENS

Mailing Address 111 CENTER STREET

City

LITTLE ROCK

State

AR

Zip Code

72201-4402

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23100.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221941

Amount of Each Receipt this Period

23100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. STEPHANIE S. STERKEL

Mailing Address 9746 LITZSINGER ROAD

City

SAINT LOUIS

State

MO

Zip Code

63124-1058

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3788.11

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194155

Amount of Each Receipt this Period

3788.11

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JEFF W. STERLING

Mailing Address 2000 BEAVER PLACE AVE SW

City

CANTON

State

OH

Zip Code

44706-1963

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEAVER EXCAVATING CO

Occupation
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179955

Amount of Each Receipt this Period

185.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

27073.11

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JEFF W. STERLING

Mailing Address 2000 BEAVER PLACE AVE SW

City

CANTON

State

OH

Zip Code

44706-1963

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEAVER EXCAVATING CO

Occupation

CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220168

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD C. STEVENS

Mailing Address 1111 FOX CHASE CT

City

DAYTON

State

OH

Zip Code

45459-4938

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEVENS & SHOWALTER LLP

Occupation

PATENT ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207485

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM P. STEVENS, JR.

Mailing Address 4275 OWENS RD. APT. 115

City

EVANS

State

GA

Zip Code

30809-3064

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195773

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. CAMPBELL STEWARD

Mailing Address 65 ASBURY STREET

City

TOPSFIELD

State

MA

Zip Code

01983-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer
KORTEC INC.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195646

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARCIE R. STIMMEL

Mailing Address 33750 BRIGGS RD

City

MENIFEE

State

CA

Zip Code

92584-9403

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196529

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. VENON J. STOEHR

Mailing Address 365 E FRANCIS ST.

City

CORONA

State

CA

Zip Code

92879-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAG-IAS LLC

Occupation

FIELD SERVICE TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208253

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. VENON J. STOEHR

Mailing Address 365 E FRANCIS ST.

City

CORONA

State

CA

Zip Code

92879-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAG-IAS LLC

Occupation

FIELD SERVICE TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210354

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN R. STOIKA

Mailing Address 333 NORTH SAM HOUSTON PARKWAY
SUITE 1060

City

HOUSTON

State

TX

Zip Code

77060-2489

FEC ID number of contributing
federal political committee.

C

Name of Employer
CASTEX ENERGY INC.

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194223

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DARRLY F. STONE

Mailing Address 1101 RANCHWOOD PL

City

DIAMOND BAR

State

CA

Zip Code

91765-4370

FEC ID number of contributing
federal political committee.

C

Name of Employer
APR CONSULTING INC.

Occupation

C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226273

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MICHAEL STONE

Mailing Address 142 W DETWEILLER DR

City

PEORIA

State

IL

Zip Code

61615-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer
RLI

Occupation

INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208174

Amount of Each Receipt this Period

1300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. ADA A. STRASENBURGH

Mailing Address P.O. BOX 608

City

OCEAN VIEW

State

NJ

Zip Code

08230-0608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14216067

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. ADA A. STRASENBURGH

Mailing Address P.O. BOX 608

City

OCEAN VIEW

State

NJ

Zip Code

08230-0608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218544

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ADA A. STRASENBURGH

Mailing Address P.O. BOX 608

City

OCEAN VIEW

State

NJ

Zip Code

08230-0608

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224480

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. GRETCHEN E. STRAUSS

Mailing Address 1269 NATIONAL RD. APT. 19

City

WHEELING

State

WV

Zip Code

26003-5724

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177691

Amount of Each Receipt this Period

85.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GRETCHEN E. STRAUSS

Mailing Address 1269 NATIONAL RD. APT. 19

City

WHEELING

State

WV

Zip Code

26003-5724

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179494

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. GRETCHEN E. STRAUSS

Mailing Address 1269 NATIONAL RD. APT. 19

City

WHEELING

State

WV

Zip Code

26003-5724

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184939

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. GRETCHEN E. STRAUSS

Mailing Address 1269 NATIONAL RD. APT. 19

City

WHEELING

State

WV

Zip Code

26003-5724

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200768

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RICHARD STRAUSS

Mailing Address 2701 SHORE DR.

City

VILLAS

State

NJ

Zip Code

08251-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204769

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GREGORY STRICKLAND

Mailing Address 210 FLOWERS COVE LN.

City

LILBURN

State

GA

Zip Code

30047-7047

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHOW PROS ENTERTAINMENT
SERVICES

Occupation

TICKET-TAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181044

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GREGORY STRICKLAND

Mailing Address 210 FLOWERS COVE LN.

City

LILBURN

State

GA

Zip Code

30047-7047

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHOW PROS ENTERTAINMENT
SERVICES

Occupation

TICKET-TAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190335

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GREGORY STRICKLAND

Mailing Address 210 FLOWERS COVE LN.

City

LILBURN

State

GA

Zip Code

30047-7047

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHOW PROS ENTERTAINMENT
SERVICES

Occupation

TICKET-TAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198914

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 511 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAMES STRICKLIN

Mailing Address PO BOX 36

City

ARCADIA

State

MO

Zip Code

63621-0036

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
PRESIDENT

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185929

Amount of Each Receipt this Period

185.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID STROPES

Mailing Address 609 ILANO CT

City

SOUTHLAKE

State

TX

Zip Code

76092

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF RAILWAY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
VP - AUDIT

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197663

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARY N. STULTZ

Mailing Address 262 DEERFIELD CIR

City

KINGWOOD

State

WV

Zip Code

26537-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184218

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1385.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SCOTT STYLES

Mailing Address 3609 N. ROCKINGHAM ST.

City

ARLINGTON

State

VA

Zip Code

22213-1429

FEC ID number of contributing
federal political committee.

C

Name of Employer
AHIP

Occupation

GOVERNMENT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14210183

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FRANK H. SUITS

Mailing Address 14250 ROYAL HARBOUR CT
UNIT 815

City

FORT MYERS

State

FL

Zip Code

33908-6572

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14216767

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES R. SULLIVAN

Mailing Address 4306 S MINNESOTA AVE

City

SIOUX FALLS

State

SD

Zip Code

57105-6747

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14183688

Amount of Each Receipt this Period

125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 513 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ROZENE R. SUPPLE

Mailing Address 1850 SMOKE TREE LANE

City

PALM SPRINGS

State

CA

Zip Code

92264-1602

FEC ID number of contributing
federal political committee.

C

Name of Employer
R & R BROADCASTING- CAMEL-
OT THEATRES

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221293

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DIAN C. SUSTEK

Mailing Address 26 SOUTHGATE DR

City

THE WOODLANDS

State

TX

Zip Code

77380-2633

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180020

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DOTTIE M. SUTHERLAND

Mailing Address 720 LAKESTONE RD

City

UNION HALL

State

VA

Zip Code

24176-4079

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation

NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175533

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 514 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PATRICK SWEARINGEN

Mailing Address 100 MYANOS RD

City

NEW CANAAN

State

CT

Zip Code

06840-3924

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENERGY TRUST LLC

Occupation

INVESTMENT MANAGEMENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14221927

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JOHN B. SWITZER

Mailing Address 4809 SURFCREST DR.

City

OAK HARBOR

State

WA

Zip Code

98277-7903

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218826

Amount of Each Receipt this Period

210.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RONALD L. SWOGER

Mailing Address 443 GARDEN LEAF DR

City

LOUISVILLE

State

KY

Zip Code

40241

FEC ID number of contributing
federal political committee.

C

Name of Employer
JEFF VENDING CO AND DOWNI-
NG VENDING

Occupation

SALES MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203890

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

690.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 515 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RONALD L. SWOGER

Mailing Address 443 GARDEN LEAF DR

City

LOUISVILLE

State

KY

Zip Code

40241

FEC ID number of contributing
federal political committee.

C

Name of Employer
JEFF VENDING CO AND DOWN-
ING VENDING

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204111

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID A. SYDORICK

Mailing Address 15 BEVERLY PARK

City

BEVERLY HILLS

State

CA

Zip Code

90210-1540

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185957

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. WALTER J. SZYDLOWSKI, JR.

Mailing Address 6475 SUGAR TREE DR.

City

SPRING HILL

State

FL

Zip Code

34607-2517

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196860

Amount of Each Receipt this Period

225.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

555.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 516 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MARSHALL TANNER

Mailing Address 209 COLLEGE ST

City

OXFORD

State

NC

Zip Code

27565-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14193072

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. VALENTINE J. TAUBNER, JR.

Mailing Address 45 HEYWOOD RD

City

PELHAM

State

NY

Zip Code

10803-2503

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCM CORPOccupation
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14195472

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. THOMAS J. TAUKE

Mailing Address 1405 GREENWOOD PLACE

City

ALEXANDRIA

State

VA

Zip Code

22304-1604

FEC ID number of contributing
federal political committee.

C

Name of Employer
VERIZON COMMUNICATIONSOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14194206

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. FRANK M. TAYLOR

Mailing Address 18830 N PALO VERDE DR

City

SUN CITY

State

AZ

Zip Code

85373-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201188

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GENE TAYLOR

Mailing Address P.O. BOX 12166

City

JACKSON

State

MS

Zip Code

39236-2166

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192122

Amount of Each Receipt this Period

40.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GENE TAYLOR

Mailing Address P.O. BOX 12166

City

JACKSON

State

MS

Zip Code

39236-2166

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217393

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GENE TAYLOR

Mailing Address P.O. BOX 12166

City

JACKSON

State

MS

Zip Code

39236-2166

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217510

Amount of Each Receipt this Period

40.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GENE TAYLOR

Mailing Address P.O. BOX 12166

City

JACKSON

State

MS

Zip Code

39236-2166

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14217796

Amount of Each Receipt this Period

80.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARGARET A. TAYLOR

Mailing Address 2418 ROGUE VALLEY MANOR DRIVE

City

MEDFORD

State

OR

Zip Code

97504-4513

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190172

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. THADDEUS M. TAYLOR

Mailing Address 2704 S GROVE ST

City

ARLINGTON

State

VA

Zip Code

22202-2424

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179658

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM TAYLOR

Mailing Address 141 VERNON ST. W

City

MANCHESTER

State

CT

Zip Code

06042-2209

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184793

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM TAYLOR

Mailing Address 141 VERNON ST. W

City

MANCHESTER

State

CT

Zip Code

06042-2209

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188901

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 520 / 760
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PETER B. TEETS

Mailing Address **9730 HIGHLAND GLEN PL**

City State Zip Code
COLORADO SPRINGS CO 80920-2438

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 15 / 2011

Transaction ID: SA11.14200555

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. G. ERNEST TEMPLE

Mailing Address **P.O. BOX 5**

City State Zip Code
TWIN MOUNTAIN NH 03595-0005

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

CONSULTANT

Aggregate Year-to-Date ▼

220.00

Date of Receipt

04 / 11 / 2011

Transaction ID: SA11.14189403

Amount of Each Receipt this Period

220.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
TERRY L. TERHUNE

Mailing Address **P.O. BOX 1478**

City State Zip Code
SISTERS OR 97759-1478

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 14 / 2011

Transaction ID: SA11.14198636

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

670.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 521 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN TEVENAN

Mailing Address 1192 EDWARD PL

City

GOLETA

State

CA

Zip Code

93117-1825

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209808

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. GEORGE H. THOMAS

Mailing Address 934 BRIAR RIDGE DR

City

HOUSTON

State

TX

Zip Code

77057-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14215230

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JUDY THOMAS

Mailing Address 209 ATLAS RD

City

YOUNGSVILLE

State

LA

Zip Code

70592-5258

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

OIL AND GAS TOOLS

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14201222

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 522 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JUDY THOMAS

Mailing Address 209 ATLAS RD

City

YOUNGSVILLE

State

LA

Zip Code

70592-5258

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OIL AND GAS TOOLS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	8	/	2	0	1	1

Transaction ID: SA11.14206749

Amount of Each Receipt this Period

5.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT E. THOMAS

Mailing Address P.O. BOX 4679

City

TULSA

State

OK

Zip Code

74159-0679

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OIL & GAS PRODUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	1	1

Transaction ID: SA11.14225401

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT S. THOMAS

Mailing Address 6115 PAHAGACO RD

City

SPRING GROVE

State

PA

Zip Code

17362-8732

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	1	1

Transaction ID: SA11.14189318

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 523 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT W. THOMAS

Mailing Address 494 W 10TH AVE APT 313

City

EUGENE

State

OR

Zip Code

97401-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14175542

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. WILLIAM R. THOMAS

Mailing Address 6678 GUM BRANCH RD

City

RICHLANDS

State

NC

Zip Code

28574-8218

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
BUSINESSMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192583

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. BARBARA THOMPSON

Mailing Address 463B NEW HAVEN WAY

City

MONROE TWP

State

NJ

Zip Code

08831-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14202450

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 524 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. BARBARA THOMPSON

Mailing Address 463B NEW HAVEN WAY

City

MONROE TWP

State

NJ

Zip Code

08831-1813

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205715

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HUBERT THOMPSON

Mailing Address 7 LUMAC DR

City

EAST HANOVER

State

NJ

Zip Code

07936-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175548

Amount of Each Receipt this Period

175.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. AURTHUR H. THORNHILL, JR.

Mailing Address 250 PANTOPS MOUNTAIN RD. APT. 5303

City

CHARLOTTESVLE

State

VA

Zip Code

22911-8703

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205416

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

785.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 525 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JEAN T. TICHENOR

Mailing Address 9016 N MORNING GLORY RD.

City

PARADISE VLY

State

AZ

Zip Code

85253-1737

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204432

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. KATHY TIDWELL

Mailing Address 95 W WICKLIFF CREEK CIR.

City

EADS

State

TN

Zip Code

38028-3338

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

OWNER

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202131

Amount of Each Receipt this Period

225.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEVEN TIGHE

Mailing Address 25 SYCAMORE STREET

City

BRONXVILLE

State

NY

Zip Code

10708-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF AMERICA MERRILL
LYNCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

NATIONAL SALES DIRECTOR

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202371

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5475.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 526 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WARREN F. TIGNER

Mailing Address 2203 MILLER RD

City

ROSHARON

State

TX

Zip Code

77583-4533

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186813

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD G. TILGHMAN

Mailing Address 5104 CARY STREET ROAD

City

RICHMOND

State

VA

Zip Code

23226-1645

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14205677

Amount of Each Receipt this Period

420.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEVEN G. TILTON

Mailing Address 14 DARWIN AVENUE

City

TAKOMA PARK

State

MD

Zip Code

20912-4241

FEC ID number of contributing
federal political committee.

C

Name of Employer
OGILVY GOVERNMENT RELATIO-
NSOccupation
SENIOR V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180450

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

720.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 527 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. STEVEN G. TILTON

Mailing Address 14 DARWIN AVENUE

City

TAKOMA PARK

State

MD

Zip Code

20912-4241

FEC ID number of contributing
federal political committee.

C

Name of Employer
OGILVY GOVERNMENT RELATIO-
NS

Occupation
SENIOR V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189726

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. G. D. TIMMONS, M.D.

Mailing Address 300 LOCUST ST
STE 460

City

AKRON

State

OH

Zip Code

44302-1804

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211694

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BARBARA D. TOBER

Mailing Address 620 PARK AVE FL 11

City

NEW YORK

State

NY

Zip Code

10065-6561

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212215

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 528 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. WILLIAM J. TRAYNOR

Mailing Address 12594 CAMINO EMPARRADO

City

SAN DIEGO

State

CA

Zip Code

92128-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196272

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

LISA TRDOSLAVIC

Mailing Address 72-94 CALAMUS AVENUE

City

WOODSIDE

State

NY

Zip Code

11377-7644

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAZARD CAPITAL MARKETS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INVESTMENT BANKING

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191790

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LISA TRDOSLAVIC

Mailing Address 72-94 CALAMUS AVENUE

City

WOODSIDE

State

NY

Zip Code

11377-7644

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAZARD CAPITAL MARKETS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INVESTMENT BANKING

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194702

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. RYAN TRIPLETTE

Mailing Address 1512 KINGMAN PLACE, NW

City

WASHINGTON

State

DC

Zip Code

20005-3709

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTEL

Occupation

DIRECTOR OF GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180451

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CARLTON J. TROSCLAIR

Mailing Address 249 SIR THOMAS LUNSFORD DR.

City

WILLIAMSBURG

State

VA

Zip Code

23185-3387

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222085

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KENNY A. TROUTT

Mailing Address 10595 STRAIT LANE

City

DALLAS

State

TX

Zip Code

75229-5424

FEC ID number of contributing
federal political committee.

C

Name of Employer
MT. VERNON INVESTMENTS

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198341

Amount of Each Receipt this Period

30800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

31250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 530 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ELTON D. TURNER

Mailing Address 407 S MAIN ST

City

SWAINSBORO

State

GA

Zip Code

30401-3616

FEC ID number of contributing
federal political committee.

C

Name of Employer
TURNER AND JONES LLC

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14191725

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. LEE L. TUTTLE, JR.

Mailing Address 4718 HALLMARK DR APT 102

City

HOUSTON

State

TX

Zip Code

77056-3911

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14207738

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. IRENE ULMI

Mailing Address 430 GRAND BAY DRIVE
#1401

City

KEY BISCAVNE

State

FL

Zip Code

33149-1944

FEC ID number of contributing
federal political committee.

C

Name of Employer
SAZINGG COMPANY

Occupation

DESIGNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197909

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10135.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 531 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. REINHARD R. ULRICH

Mailing Address 11309 HUNTOVER DR

City

ROCKVILLE

State

MD

Zip Code

20852-3615

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14195968

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. BEN A. UNDERWOOD

Mailing Address 303 N HUBBARDS LN.

City

LOUISVILLE

State

KY

Zip Code

40207-2252

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14185945

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RANDY UNDERWOOD

Mailing Address 39 DOE RUN CT.

City

WEST CHESTER

State

PA

Zip Code

19382-7491

FEC ID number of contributing
federal political committee.**C**Name of Employer
DFG CORPOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192193

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CALVIN K. UPP

Mailing Address 212 N ELM ST.

City

WELLINGTON

State

KS

Zip Code

67152-2937

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14223743

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

BARBARA VAN AMBERG

Mailing Address 101 NEWBERRY LN.

City

HOWELL

State

MI

Zip Code

48843-9567

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14182267

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BARBARA VAN AMBERG

Mailing Address 101 NEWBERRY LN.

City

HOWELL

State

MI

Zip Code

48843-9567

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	1

Transaction ID: SA11.14209170

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. DORINDA W. VAN BURKLEO

Mailing Address 1400 W IRIS AVE.

City

MCALLEN

State

TX

Zip Code

78501-3959

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14201099

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RAY VAN BRUWAENE

Mailing Address 7341 W MERCER WAY

City

MERCER ISLAND

State

WA

Zip Code

98040-5552

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14177690

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. RICHARD VAN HOUTEN

Mailing Address 13 ELM STREET

City

ALLENDALE

State

NJ

Zip Code

07401-1508

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14184370

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. MAE E. VANGSNESS

Mailing Address 7300 W DEAN RD. APT. 3060

City

MILWAUKEE

State

WI

Zip Code

53223-2653

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179588

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MISS KATHLEEN VANOPPELEN

Mailing Address 5071 ORION RD

City

ROCHESTER

State

MI

Zip Code

48306-2543

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188787

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

RONALD L. VAUGH

Mailing Address 6002 E CALLE SILVOSA

City

TUCSON

State

AZ

Zip Code

85711-6919

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198432

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

VICTOR VELAZQUEZ

Mailing Address 1790 SW 27TH AVENUE

City

MIAMI

State

FL

Zip Code

33145-2418

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENTLE CARE, INC.

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189712

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DON VERNON

Mailing Address 1448 SNATA LUISA DR

City

SOLANA BEACH

State

CA

Zip Code

92075-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220225

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DON ALLEN VERNON

Mailing Address 1448 SANTA LUISA DR

City

SOLANA BEACH

State

CA

Zip Code

92075-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14220061

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. BRUCE H. VINCENT

Mailing Address 306 TERRACE DRIVE

City

HOUSTON

State

TX

Zip Code

77007-5047

FEC ID number of contributing
federal political committee.

C

Name of Employer
SWIFT ENERGY COMPANY

Occupation

PRESIDENT AND DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194217

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KENNETH VOGES

Mailing Address 11113 OBST RD.

City

RED BUD

State

IL

Zip Code

62278-4225

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190074

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JAMES A. WAGNER

Mailing Address 4372 42ND ST SW

City

GRANDVILLE

State

MI

Zip Code

49418-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224427

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DEREK WALKER

Mailing Address 1100 POYDRAS ST STE 2300

City

NEW ORLEANS

State

LA

Zip Code

70163-2301

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHAFFE MCCALL

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14202181

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. FALBA WALKER

Mailing Address 270 TEMPLE RD

City

PETAL

State

MS

Zip Code

39465-9545

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14209797

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JEAL WALKER

Mailing Address 6917 BAL LAKE DR

City

FORT WORTH

State

TX

Zip Code

76116-8017

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192184

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT H. WALKER

Mailing Address 411 FOREST STREET

City

LEWISBURG

State

TN

Zip Code

37091-3738

FEC ID number of contributing
federal political committee.

C

Name of Employer
WALKER DIE CASTING

Occupation

MANUFACTURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179586

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT S. WALKER

Mailing Address 609 WILLOW GREEN

City

LITITZ

State

PA

Zip Code

17543-8369

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229237

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WILLIAM D. WALKER

Mailing Address 8 SHEPHERDS PL.

City

MONTEREY

State

CA

Zip Code

93940-5807

FEC ID number of contributing
federal political committee.

C

Name of Employer
VEGA INVESTMENTS

Occupation

PROPERTY MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194538

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 539 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.Full Name (Last, First, Middle Initial)
BARBARA WALLACE

Mailing Address 520 CIR DR

City
HUDSONState
NCZip Code
28638-2519FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14182153

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MR. JOHN W. WALLER, IIIMailing Address ONE ROCKEFELLER PLAZA
23RD FL.City
NEW YORKState
NYZip Code
10020-2003FEC ID number of contributing
federal political committee.

C

Name of Employer
WALLER CAPITAL

Occupation

INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14194164

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
MR. WILLIAM C. WALSH

Mailing Address 524 MARIANA DR

City
RIO VISTAState
CAZip Code
94571-5164FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	1

Transaction ID: SA11.14186269

Amount of Each Receipt this Period

450.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GEORGE WALTER

Mailing Address P.O. BOX 67

City

CIRCLE PINES

State

MN

Zip Code

55014-0067

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184928

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD L. WARD

Mailing Address 20560 N BIG DIPPER DR

City

MARICOPA

State

AZ

Zip Code

85138-3161

FEC ID number of contributing
federal political committee.

C

Name of Employer
RAYTHEON

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14194187

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT A. WARD, JR.

Mailing Address 393 SKI TRL

City

KINNELON

State

NJ

Zip Code

07405-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANSERVE INC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226319

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. SONNY L. WARD

Mailing Address 3978 W 5820 S

City

SALT LAKE CITY

State

UT

Zip Code

84118-3759

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERSTATE BRICK CO.

Occupation

SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181048

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. SONNY L. WARD

Mailing Address 3978 W 5820 S

City

SALT LAKE CITY

State

UT

Zip Code

84118-3759

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERSTATE BRICK CO.

Occupation

SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14181400

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. SONNY L. WARD

Mailing Address 3978 W 5820 S

City

SALT LAKE CITY

State

UT

Zip Code

84118-3759

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERSTATE BRICK CO.

Occupation

SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222818

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ALICE B. WARE

Mailing Address 366 FAIRWAY AVE

City

CHILLICOTHE

State

OH

Zip Code

45601-1217

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14179941

Amount of Each Receipt this Period

180.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JON WARE

Mailing Address 1553 MOUND AVE

City

JACKSONVILLE

State

IL

Zip Code

62650-2255

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14219814

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. WALTER F. WATKINS

Mailing Address 1870 BRIDLE RIDGE TRCE

City

ROSWELL

State

GA

Zip Code

30075-2151

FEC ID number of contributing
federal political committee.

C

Name of Employer
APOLLO M. D.

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190359

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. WALTER F. WATKINS

Mailing Address 1870 BRIDLE RIDGE TRCE

City

ROSWELL

State

GA

Zip Code

30075-2151

FEC ID number of contributing
federal political committee.

C

Name of Employer
APOLLO M. D.

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214771

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT F. WATSON

Mailing Address 4001 GULFSHORE BLVD N 604

City

NAPLES

State

FL

Zip Code

34103-3426

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14196844

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. B. J. WEBB

Mailing Address 1201 HARRIS DR

City

BARTLESVILLE

State

OK

Zip Code

74006-5511

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190103

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. KIMALIE WEBB

Mailing Address 1611 STABLE CIR

City

INDIANAPOLIS

State

IN

Zip Code

46239-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer
UI LILLIAN COMPANY

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213643

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

E. W. WEEKS

Mailing Address 31 HILLTOP ROAD

City

MENDHAM

State

NJ

Zip Code

07945-1206

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178497

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

E. W. WEEKS

Mailing Address 31 HILLTOP ROAD

City

MENDHAM

State

NJ

Zip Code

07945-1206

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224756

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN W. WEEKS

Mailing Address 386 LIVE OAK LN.

City

MARCO ISLAND

State

FL

Zip Code

34145-1866

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14192854

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL WEEKS, III

Mailing Address 350 SOUTH JOHN Q. HAMMOND PARKWAY
STE. 11D

City

SPRINGFIELD

State

MO

Zip Code

65806-2595

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14227169

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GEORGE WEISZ

Mailing Address 5329 E. YUCCA STREET

City

SCOTTSDALE

State

AZ

Zip Code

85254-4764

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	1

Transaction ID: SA11.14194175

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

W. WELCH

Mailing Address 5418 ECHOLS AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22311-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14198392

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

C. W. WELLEN

Mailing Address 1301 MCKINNEY ST STE 5100

City

HOUSTON

State

TX

Zip Code

77010-3095

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175516

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN C. WELLEMEYER

Mailing Address 89 ROSEDALE RD

City

PRINCETON

State

NJ

Zip Code

08540-6701

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188263

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1410.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. LAVON WENGER

Mailing Address 1524 CENTENNIAL DR

City

SABETHA

State

KS

Zip Code

66534-1538

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14207362

Amount of Each Receipt this Period

225.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

PATRICIA WENTZ

Mailing Address 62238 CARLTON DR

City

CASSOPOLIS

State

MI

Zip Code

49031-9377

FEC ID number of contributing
federal political committee.

C

Name of Employer
WERNTZ SUPPLY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

SECRETARY

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198575

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MISS SALLY A. WEST

Mailing Address 7243 W MERCER WAY

City

MERCER ISLAND

State

WA

Zip Code

98040-5533

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14226058

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 548 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. PETER C. WESTENSKOW

Mailing Address 3420 COLUMBIA VIEW DR

City

THE DALLES

State

OR

Zip Code

97058-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14184974

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PETER C. WESTENSKOW

Mailing Address 3420 COLUMBIA VIEW DR

City

THE DALLES

State

OR

Zip Code

97058-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14202512

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. GAYLE A. WHEELER

Mailing Address 10786 QUAIL CREEK DRIVE E.

City

PARKER

State

CO

Zip Code

80138-3063

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Transaction ID: SA11.14229235

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 549 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MAURICE L. WHITAKER

Mailing Address 97 W CARTER AVE

City

SIERRA MADRE

State

CA

Zip Code

91024-1252

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14213062

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. JUNE WHITEHEAD

Mailing Address 31 GREENBRIER CT

City

NEW BEDFORD

State

MA

Zip Code

02745-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205177

Amount of Each Receipt this Period

35.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. LOIS I. WHITEHEAD

Mailing Address 5382 LAURELTON AVE

City

GARDEN GROVE

State

CA

Zip Code

92845-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14177673

Amount of Each Receipt this Period

80.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 550 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. LOIS I. WHITEHEAD

Mailing Address 5382 LAURELTON AVE

City

GARDEN GROVE

State

CA

Zip Code

92845-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195962

Amount of Each Receipt this Period

85.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. GENEVA WHITLOW

Mailing Address 507 W OAK DR

City

ROUND ROCK

State

TX

Zip Code

78664-3028

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192391

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. STEVE WIGGINS

Mailing Address 213 SUTHERLAND LN

City

LEAGUE CITY

State

TX

Zip Code

77573-6292

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14215990

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

535.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ALLEN WIGHTMAN

Mailing Address 211 W CHICAGO AVE
STE 215A

City State Zip Code
HINSDALE IL 60521-3355

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188505

Amount of Each Receipt this Period

120.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. CHARLES W. WIKLE

Mailing Address 1043 S MADISON ST

City State Zip Code
TUPELO MS 38801-6309

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTH MISSISSIPPI ORAL SU-
RG. A

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203363

Amount of Each Receipt this Period

160.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LAWRENCE A. WILEY

Mailing Address 108 N. GREEN BAY ROAD

City State Zip Code
APPLETON WI 54911-5625

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189704

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1780.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAUL F. WILEY

Mailing Address PO BOX 114

City

SALEM

State

VA

Zip Code

24153-0114

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14210104

Amount of Each Receipt this Period

210.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ELOISE WILKERSON

Mailing Address 3538 POLO PARC CT.

City

BIRMINGHAM

State

AL

Zip Code

35226-3374

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208132

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. FLORENCE W. WILLIAMSON

Mailing Address 103 S YELLOWSTONE AVE.
APT. D

City

BOZEMAN

State

MT

Zip Code

59718-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14206481

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. JOANNE WILLIAMS

Mailing Address 19 BRAD ALAN DRIVE

City

BRUNSWICK

State

MD

Zip Code

21758-9005

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROXYAVIATION SYSTEMS, IN-
C.

Occupation

DIRECTOR, FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189727

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN R. WILLIAMS

Mailing Address 7 AZALEA COURT

City

WHEELING

State

WV

Zip Code

26003-5477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184966

Amount of Each Receipt this Period

305.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JOHN R. WILLIAMS

Mailing Address 7 AZALEA COURT

City

WHEELING

State

WV

Zip Code

26003-5477

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14186938

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1005.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. LACY H. WILLIAMS

Mailing Address 416 TRAVIS STREET
SUITE 1200

City

SHREVEPORT

State

LA

Zip Code

71101-5504

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Transaction ID: SA11.14198319

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

RICHARD A. WILLIAMS

Mailing Address 1126 ROSETTA ST.

City

LAKE CHARLES

State

LA

Zip Code

70607-1928

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14210794

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROY C. WILLIAMSON, JR.

Mailing Address 310 W WALL ST.
STE. 300

City

MIDLAND

State

TX

Zip Code

79701-5141

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILLIAMSON PETRILLON CONS-
ULTING

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14211729

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THOMAS G. WILLIAMS

Mailing Address 6205 EQUESTRIAN CT

City

COLLEYVILLE

State

TX

Zip Code

76034-7641

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF

Occupation
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197671

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. RICHARD WILLNER

Mailing Address 4136 MEDOC DR

City

KENNER

State

LA

Zip Code

70065-1923

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTER FOR PEER REVIEW JU-
STICE

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211715

Amount of Each Receipt this Period

750.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM L. WILLOUGHBY

Mailing Address 7136 MATHEW ST

City

GREENBELT

State

MD

Zip Code

20770-3009

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14216044

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1860.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. BRYAN WILSON

Mailing Address 26512 BROKEN BIT LN

City

LAGUNA HILLS

State

CA

Zip Code

92653-5701

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194172

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DARRELL L. WILSON

Mailing Address 605 FONTAINE STREET

City

ALEXANDRIA

State

VA

Zip Code

22302-3706

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORFOLK SOUTHERN CORP.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

PUBLIC AFFAIRS

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198322

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. JOANNE G. WILSON

Mailing Address 27 EAST BRIAR HOLLOW LANE

City

HOUSTON

State

TX

Zip Code

77027-2919

FEC ID number of contributing
federal political committee.

C

Name of Employer
RIVER OAKS FINANCIAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

DIRECTOR

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14197673

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 557 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN WILSON

Mailing Address 205 TEN OAKS DR

City

GEORGETOWN

State

TX

Zip Code

78633-5605

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205214

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MARGORIE IME WILSON

Mailing Address P.O. BOX 60284

City

SAN DIEGO

State

CA

Zip Code

92166-8284

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14180470

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. J. BURL WIMSETT

Mailing Address 12555 HIGHWAY CC

City

NEOSHO

State

MO

Zip Code

64850-6228

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

FINANCIAL PLANNER

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14178510

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 558 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ALETHA WINANS

Mailing Address 757 N ELMWOOD

City

SPRINGFIELD

State

MO

Zip Code

65802-2345

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14218987

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID B. WINKLES

Mailing Address 3818 HIGHWAY 90

City

MILTON

State

FL

Zip Code

32571-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer
WINKLES PHARMACY

Occupation
PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14197870

Amount of Each Receipt this Period

350.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

STEPHEN W. WINN

Mailing Address 1650 COUNTRY CLUB RD

City

WILMINGTON

State

NC

Zip Code

28403-4821

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOYOTA OF WILMINGTON

Occupation
MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14179764

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 559 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

STEPHEN W. WINN

Mailing Address 1650 COUNTRY CLUB RD

City

WILMINGTON

State

NC

Zip Code

28403-4821

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOYOTA OF WILMINGTON

Occupation

MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197559

Amount of Each Receipt this Period

20.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

STEPHEN W. WINN

Mailing Address 1650 COUNTRY CLUB RD

City

WILMINGTON

State

NC

Zip Code

28403-4821

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOYOTA OF WILMINGTON

Occupation

MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14207107

Amount of Each Receipt this Period

20.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT J. WISE

Mailing Address 2110 HOLMAN BRIDGE RD.

City

BLACKVILLE

State

SC

Zip Code

29817-3732

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14189323

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. NATALIE M. WISMAR

Mailing Address 26231 MIRA WAY

City

BONITA SPRINGS

State

FL

Zip Code

34134-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14213736

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. DAVID J. WITCHGER

Mailing Address 46 HARTURA WAY

City

HOT SPRINGS

State

AR

Zip Code

71909-7103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14190254

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DEAN E. WOLCOTT

Mailing Address P.O. BOX 390

City

MANCOS

State

CO

Zip Code

81328-0390

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RANCHER

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14207765

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. JOHN A. WOLPERT, M.D.

Mailing Address 627 TUMBLEWEED TRL

City

NORTH SIOUX CITY

State

SD

Zip Code

57049-5166

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195787

Amount of Each Receipt this Period

200.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. CLAY WOOD

Mailing Address 16 SAN CLEMENTE CIR

City

ODESSA

State

TX

Zip Code

79765-8524

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHESTEN NATIONAL BANK

Occupation
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14211677

Amount of Each Receipt this Period

400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. LOUIS R. WOODHILL

Mailing Address 7 HAMPTON COURT

City

HOUSTON

State

TX

Zip Code

77024-5447

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194226

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. MARCUS E. WOODS

Mailing Address 50 MORSE LANDING DR

City

CICERO

State

IN

Zip Code

46034-9332

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194350

Amount of Each Receipt this Period

60.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. EVELYN P. WOODWARD

Mailing Address 28 JEFFERSON CT S

City

SAINT PETERSBURG

State

FL

Zip Code

33711-5119

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14188496

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. DONALD A. WORKMAN

Mailing Address 6904 GEORGETOWN PIKE

City

MCLEAN

State

VA

Zip Code

22101-2147

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAKER HOSTITLER

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198605

Amount of Each Receipt this Period

800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

970.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JAY A. WORTMAN

Mailing Address P.O. BOX 676

City

MORRISTOWN

State

IN

Zip Code

46161-0676

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

ELECTRICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180063

Amount of Each Receipt this Period

110.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JEFFREY WRIGHT

Mailing Address 1603 TEALCREST COURT

City

KELLER

State

TX

Zip Code

76248-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer
BNSF RAILWAY

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202369

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. DAVID WU

Mailing Address 3848 DIXON PL

City

SAN DIEGO

State

CA

Zip Code

92107-3740

FEC ID number of contributing
federal political committee.

C

Name of Employer
APEX ANESTHESIA MEDICAL
GROUP

Occupation

ANESTHESIOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14208190

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 564 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. GEORGE WU

Mailing Address 368 SAN BENITO WAY

City

SAN FRANCISCO

State

CA

Zip Code

94127-2533

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14197256

Amount of Each Receipt this Period

160.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH WYCKOFF

Mailing Address 2 SUTTON PL S APT 2G

City

NEW YORK

State

NY

Zip Code

10022-3799

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180009

Amount of Each Receipt this Period

220.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. ELIZABETH WYCKOFF

Mailing Address 2 SUTTON PL S APT 2G

City

NEW YORK

State

NY

Zip Code

10022-3799

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203574

Amount of Each Receipt this Period

160.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 565 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. ROBIN WYLIE

Mailing Address 1901 MARATHON ROAD

City

ABILENE

State

TX

Zip Code

79601-2669

FEC ID number of contributing
federal political committee.

C

Name of Employer
TKISTAK HOME CARE INC

Occupation
NURSE/RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14200957

Amount of Each Receipt this Period

310.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. DOROTHY B. WYNN

Mailing Address 706 8TH ST NW

City

SPRINGHILL

State

LA

Zip Code

71075-2406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14203300

Amount of Each Receipt this Period

63.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. DOROTHY B. WYNN

Mailing Address 706 8TH ST NW

City

SPRINGHILL

State

LA

Zip Code

71075-2406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14205133

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

408.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. DOROTHY B. WYNN

Mailing Address 706 8TH ST NW

City

SPRINGHILL

State

LA

Zip Code

71075-2406

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	1

Transaction ID: SA11.14216634

Amount of Each Receipt this Period

35.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. HENRY YAEGER

Mailing Address 22137 MARTELLA AVE

City

BOCA RATON

State

FL

Zip Code

33433-4661

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14181851

Amount of Each Receipt this Period

60.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WILLIAM M. YANDELL

Mailing Address 5842 GARDEN RIVER CV

City

MEMPHIS

State

TN

Zip Code

38120-2501

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTSOccupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14191697

Amount of Each Receipt this Period

220.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

315.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 567 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. JO E. YATES

Mailing Address 125 BROOKLINE DR

City

PINEHURST

State

NC

Zip Code

28374-7129

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11.14226583

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. THOMAS J. YATES

Mailing Address 9316 TERRACE VIEW CT.

City

JEROME

State

MI

Zip Code

49249-9783

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼
Occupation
RETIRED

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	1

Transaction ID: SA11.14180778

Amount of Each Receipt this Period

45.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

DR. BILLY K. YEH

Mailing Address 8950 N. KENDALL DRIVE
STE. 501

City

MIAMI

State

FL

Zip Code

33176-2127

FEC ID number of contributing
federal political committee.**C**Name of Employer
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼
Occupation
OWNER

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	1

Transaction ID: SA11.14202363

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1045.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. MARY J. YEP GULINO

Mailing Address 4200 OLD COLUMBIA PIKE

City

ANNANDALE

State

VA

Zip Code

22003-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14210722

Amount of Each Receipt this Period

115.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. MARY J. YEP GULINO

Mailing Address 4200 OLD COLUMBIA PIKE

City

ANNANDALE

State

VA

Zip Code

22003-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11.14212243

Amount of Each Receipt this Period

70.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MRS. MARGARET YODER

Mailing Address 11826 WOODSTREAM RIDGE CT

City

FORT WAYNE

State

IN

Zip Code

46845-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14185942

Amount of Each Receipt this Period

110.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 569 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. RODNEY N. YOSHIDA

Mailing Address 6 SPRUCEFIELD COURT

City

NEW HOPE

State

PA

Zip Code

18938-1083

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14193614

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MRS. EARLE YOUNGBLOOD

Mailing Address 10811 BURR OAK DRIVE

City

SAN ANTONIO

State

TX

Zip Code

78230-4327

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11.14183699

Amount of Each Receipt this Period

55.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. GRANT C. YOUNG

Mailing Address 23633 CARROLL RD

City

LANARK

State

IL

Zip Code

61046-8890

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14184751

Amount of Each Receipt this Period

79.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

634.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 570 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. GRANT C. YOUNG

Mailing Address 23633 CARROLL RD

City

LANARK

State

IL

Zip Code

61046-8890

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14200765

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

THOMAS K. YUE

Mailing Address 8718 ALVARADO TR

City

INVER GROVE HEIGHT

State

MN

Zip Code

55077-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14204639

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. WALTER J. ZABLE

Mailing Address PO BOX 1525

City

RCHO SANTA FE

State

CA

Zip Code

92067-1525

FEC ID number of contributing
federal political committee.

C

Name of Employer
CUBIC CORPORATION

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189744

Amount of Each Receipt this Period

30800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

31400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ANTHONY ZANZE

Mailing Address 99 RANCHO DR.

City

BELVEDERE TIBURON

State

CA

Zip Code

94920-2662

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219675

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. KHEYROLLAH S. ZARGHAMI

Mailing Address 7512 POCKET RD

City

SACRAMENTO

State

CA

Zip Code

95831-4830

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Transaction ID: SA11.14175569

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

FRITZ ZECK

Mailing Address 1140 PLANTATION POINT DR

City

GREENSBORO

State

GA

Zip Code

30642-4987

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

RETIRED

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214337

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

610.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 572 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GENE W. ZEIER

Mailing Address 2510 POTOMAC DR. UNIT B

City

HOUSTON

State

TX

Zip Code

77057-4575

FEC ID number of contributing
federal political committee.

C

Name of Employer
GULF CHEMICAL INTL CORP

Occupation

DISTRIBUTION MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14207732

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. PAUL E. ZELTNER

Mailing Address 15465 CALDAS DE REYES

City

SAN DIEGO

State

CA

Zip Code

92128-4457

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14195941

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. PAUL E. ZELTNER

Mailing Address 15465 CALDAS DE REYES

City

SAN DIEGO

State

CA

Zip Code

92128-4457

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14222233

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 573 / 760

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.Full Name (Last, First, Middle Initial)
MS. JOANNE A. ZERVOSMailing Address 144 E 84TH ST
APT 11FCity State Zip Code
NEW YORK NY 10028-2038FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID: SA11.14191743

Amount of Each Receipt this Period

205.00

CONTRIBUTION

B.Full Name (Last, First, Middle Initial)
MS. JEAN A. ZIMMERMAN

Mailing Address 60 SEAGATE DR APT 1604

City State Zip Code
NAPLES FL 34103-2444FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

Transaction ID: SA11.14180006

Amount of Each Receipt this Period

110.00

CONTRIBUTION

C.Full Name (Last, First, Middle Initial)
DR. WILLIAM ZINGARELLI

Mailing Address 10324 SW 48TH PL

City State Zip Code
GAINESVILLE FL 32608-7177FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF FLORIDAOccupation
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Transaction ID: SA11.14178556

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

615.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 574 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. R. B. ZINSER

Mailing Address 3158 ORLEANS E.

City

SAN DIEGO

State

CA

Zip Code

92110-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14180043

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT B. ZINSER

Mailing Address 3158 ORLEANS E

City

SAN DIEGO

State

CA

Zip Code

92110-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14182821

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT B. ZINSER

Mailing Address 3158 ORLEANS E

City

SAN DIEGO

State

CA

Zip Code

92110-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14192395

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 575 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT B. ZINSER

Mailing Address 3158 ORLEANS E

City

SAN DIEGO

State

CA

Zip Code

92110-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11.14202721

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROBERT B. ZINSER

Mailing Address 3158 ORLEANS E

City

SAN DIEGO

State

CA

Zip Code

92110-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14207710

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. ROBERT B. ZINSER

Mailing Address 3158 ORLEANS E

City

SAN DIEGO

State

CA

Zip Code

92110-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14214424

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 576 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. ROBERT B. ZINSER

Mailing Address 3158 ORLEANS E

City

SAN DIEGO

State

CA

Zip Code

92110-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14224971

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JAY H. ZISES

Mailing Address 965 5TH AVE APT 10B

City

NEW YORK

State

NY

Zip Code

10075-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11.14219119

Amount of Each Receipt this Period

100.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ALLEN BOONE HUMPHRIES ROBINSON LLP

Mailing Address 3200 SOUTHWEST FREEWAY
SUITE 2600

City

HOUSTON

State

TX

Zip Code

77027-7537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198338

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS
REQUESTED

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 577 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GILA RIVER INDIAN COMMUNITY

Mailing Address P.O. BOX 2160

GOVERNOR RHODES

City

SACATON

State

AZ

Zip Code

85147-0055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189743

Amount of Each Receipt this Period

30000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

HPCP INVESTMENTS LLC

Mailing Address P.O. BOX 41567

City

HOUSTON

State

TX

Zip Code

77241-1567

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198349

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

ATTRIBUTION TO PARTNERS
REQUESTED

C.

Full Name (Last, First, Middle Initial)

NUETERRA HOLDINGS, LLC

Mailing Address 11221 ROE AVENUE
SUITE 310

City

LEAWOOD

State

KS

Zip Code

66211-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189723

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SEE ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

33500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAVID AYERS

Mailing Address 11221 ROE AVENUE
SUITE 310

City State Zip Code
LEAWOOD KS 66211-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
NUETERRA HOLDINGS, LLC

Occupation
C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.85

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189738

Amount of Each Receipt this Period

142.85

CONTRIBUTION

[MEMO ITEM]

PARTNERSHIP ATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MS. TAMMY DUCKWORTH-HAM

Mailing Address 11221 ROE AVENUE
SUITE 310

City State Zip Code
LEAWOOD KS 66211-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
NUETERRA HOLDINGS, LLC

Occupation
PRESIDENT, SURGICAL SPECIALTY DIVISION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.85

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189739

Amount of Each Receipt this Period

142.85

CONTRIBUTION

[MEMO ITEM]

PARTNERSHIP ATTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. DENISE MAYHEW

Mailing Address 11221 ROE AVENUE
SUITE 310

City State Zip Code
LEAWOOD KS 66211-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
NUETERRA HOLDINGS, LLC

Occupation
S.V.P., MARKETING AND BRAND MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.85

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189740

Amount of Each Receipt this Period

142.85

CONTRIBUTION

[MEMO ITEM]

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 579 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DAN SAALE

Mailing Address 11221 ROE AVENUE
SUITE 310

City

LEAWOOD

State

KS

Zip Code

66211-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
NUETERRA HOLDINGS, LLC

Occupation

C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.85

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189741

Amount of Each Receipt this Period

142.85

CONTRIBUTION

[MEMO ITEM]

PARTNERSHIP ATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. JOHN SCHARIO

Mailing Address 11221 ROE AVENUE
SUITE 310

City

LEAWOOD

State

KS

Zip Code

66211-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
NUETERRA HOLDING, LLC

Occupation

PRESIDENT OF OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.85

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189737

Amount of Each Receipt this Period

142.85

CONTRIBUTION

[MEMO ITEM]

PARTNERSHIP ATTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. KEVIN STANDEFER

Mailing Address 11221 ROE AVENUE
SUITE 310

City

LEAWOOD

State

KS

Zip Code

66211-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
NUETERRA HOLDINGS, LLC

Occupation

S.V.P., INVESTMENT STRATEGIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.85

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189742

Amount of Each Receipt this Period

142.85

CONTRIBUTION

[MEMO ITEM]

PARTNERSHIP ATTRIBUTION

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 580 / 760

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. DANIEL TASSET

Mailing Address 11221 ROE AVENUE
SUITE 310

City State Zip Code
LEAWOOD KS 66211-1878

FEC ID number of contributing
federal political committee.

C

Name of Employer
NUETERRA COMPANIES

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

142.86

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189736

Amount of Each Receipt this Period

142.86

CONTRIBUTION

[MEMO ITEM]

PARTNERSHIP ATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

YOCHA DEHE WINTUN NATION

Mailing Address 18960 COUNTY ROAD 75A
P.O. BOX 18

City State Zip Code
BROOKS CA 95606-0018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194170

Amount of Each Receipt this Period

30800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

30800.00

TOTAL This Period (last page this line number only)

1430465.63

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 581 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ADAM KINZINGER FOR CONGRESS

Mailing Address P.O. BOX 487

City State Zip Code
NEW LENOX IL 60451-0487

FEC ID number of contributing
federal political committee. **C** C00458877

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211788

Amount of Each Receipt this Period

1500.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
ADRIAN SMITH FOR CONGRESS

Mailing Address 3321 AVENUE I
SUITE 6

City State Zip Code
SCOTTSBLUFF NE 69361-4587

FEC ID number of contributing
federal political committee. **C** C00412890

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221951

Amount of Each Receipt this Period

12000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
BARTLETT FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 245

City State Zip Code
MIDDLETOWN MD 21769-0245

FEC ID number of contributing
federal political committee. **C** C00255190

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189719

Amount of Each Receipt this Period

8000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

21500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 582 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BOB GIBBS FOR CONGRESS

Mailing Address 6992 TOWNSHIP ROAD 466

City

LAKEVILLE

State

OH

Zip Code

44638-9794

FEC ID number of contributing
federal political committee.

C

C00466516

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211789

Amount of Each Receipt this Period

3000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)

BRADY FOR CONGRESS

Mailing Address P.O. BOX 8277

City

THE WOODLANDS

State

TX

Zip Code

77387-8277

FEC ID number of contributing
federal political committee.

C

C00311043

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221950

Amount of Each Receipt this Period

50000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)

COFFMAN FOR CONGRESS, INC

Mailing Address 9249 S. BROADWAY BLVD. #200-501

City

HIGHLANDS RANCH

State

CO

Zip Code

80129-5690

FEC ID number of contributing
federal political committee.

C

C00441006

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211783

Amount of Each Receipt this Period

12000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

65000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 583 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CONAWAY FOR CONGRESS

Mailing Address P.O. BOX 51272

City

MIDLAND

State

TX

Zip Code

79710-1272

FEC ID number of contributing
federal political committee.**C**

C00383828

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	1

Transaction ID: SA11.14229242

Amount of Each Receipt this Period

25000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)

CULBERSON FOR CONGRESS

Mailing Address P.O. BOX 41964

City

HOUSTON

State

TX

Zip Code

77241-1964

FEC ID number of contributing
federal political committee.**C**

C00343236

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

29000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	1	1

Transaction ID: SA11.14229220

Amount of Each Receipt this Period

19000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)

DAVE CAMP FOR CONGRESS

Mailing Address 5915 EASTMAN AVENUE
SUITE 100

City

MIDLAND

State

MI

Zip Code

48640-6824

FEC ID number of contributing
federal political committee.**C**

C00347476

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

147190.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	1	1

Transaction ID: SA11.14221956

Amount of Each Receipt this Period

122190.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

166190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 584 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRIENDS OF JOE PITTS

Mailing Address P.O. BOX 775

City

UNIONVILLE

State

PA

Zip Code

19375-0775

FEC ID number of contributing
federal political committee.

C

C00310136

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189718

Amount of Each Receipt this Period

15000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF DOC HASTINGS

Mailing Address P.O. BOX 2926

City

PASCO

State

WA

Zip Code

99302-2926

FEC ID number of contributing
federal political committee.

C

C00286856

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11.14211775

Amount of Each Receipt this Period

50000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)

FRIENDS OF SAM JOHNSON

Mailing Address P.O. BOX 860096

City

PLANO

State

TX

Zip Code

75086-0096

FEC ID number of contributing
federal political committee.

C

C00250720

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211782

Amount of Each Receipt this Period

25000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

90000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 585 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GEOFF DAVIS CAMPAIGN COMMITTEE

Mailing Address P.O. BOX 17192

City State Zip Code
FORT MITCHELL KY 41017-0192

FEC ID number of contributing
federal political committee. **C** C00369470

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
32500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229244

Amount of Each Receipt this Period

32500.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
GRAVES FOR CONGRESS

Mailing Address 2345 GRAND BLVD.
SUITE 2400

City State Zip Code
KANSAS CITY MO 64108-2642

FEC ID number of contributing
federal political committee. **C** C00359034

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
18000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189715

Amount of Each Receipt this Period

18000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
HOOSIERS FOR ROKITA

Mailing Address 7643 EAST U.S. HIGHWAY 36

City State Zip Code
AVON IN 46123-7972

FEC ID number of contributing
federal political committee. **C** C00476192

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189721

Amount of Each Receipt this Period

3000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

53500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JEFF DUNCAN FOR CONGRESS

Mailing Address PO BOX 732

City

CLINTON

State

SC

Zip Code

29325-0732

FEC ID number of contributing
federal political committee.

C

C00460550

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189722

Amount of Each Receipt this Period

2500.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)

JEFF DUNCAN FOR CONGRESS

Mailing Address PO BOX 732

City

CLINTON

State

SC

Zip Code

29325-0732

FEC ID number of contributing
federal political committee.

C

C00460550

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 8 / 2 0 1 1

Transaction ID: SA11.14194162

Amount of Each Receipt this Period

2000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)

LATTA FOR CONGRESS

Mailing Address 300 N. MAIN STREET

City

BOWLING GREEN

State

OH

Zip Code

43402-2423

FEC ID number of contributing
federal political committee.

C

C00438697

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.14221330

Amount of Each Receipt this Period

25500.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

30000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 587 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LYNN JENKINS FOR CONGRESS

Mailing Address P.O. BOX 1441

City

TOPEKA

State

KS

Zip Code

66601-1441

FEC ID number of contributing
federal political committee.**C** C00433730

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Transaction ID: SA11.14229231

Amount of Each Receipt this Period

20000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)

MCHENRY FOR CONGRESS

Mailing Address PO BOX 1406

City

HICKORY

State

NC

Zip Code

28603-1406

FEC ID number of contributing
federal political committee.**C** C00393629

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14194161

Amount of Each Receipt this Period

20000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)

MCKINLEY FOR CONGRESS

Mailing Address 32 20TH STREET

City

WHEELING

State

WV

Zip Code

26003-3746

FEC ID number of contributing
federal political committee.**C** C00473132

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14211785

Amount of Each Receipt this Period

1000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

41000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 588 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.Full Name (Last, First, Middle Initial)
MICHAEL BURGESS FOR CONGRESS

Mailing Address P.O. BOX 2334

City	State	Zip Code
DENTON	TX	76202-2334

FEC ID number of contributing
federal political committee. **C** C00372532

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14194159

Amount of Each Receipt this Period

20000.00

TRANSFER

B.Full Name (Last, First, Middle Initial)
NEUGEBAUER CONGRESSIONAL COMMITTEE

Mailing Address P.O. BOX 54175

City	State	Zip Code
LUBBOCK	TX	79453-4175

FEC ID number of contributing
federal political committee. **C** C00384016

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34045.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14211781

Amount of Each Receipt this Period

6000.00

TRANSFER

C.Full Name (Last, First, Middle Initial)
NEUGEBAUER CONGRESSIONAL COMMITTEE

Mailing Address P.O. BOX 54175

City	State	Zip Code
LUBBOCK	TX	79453-4175

FEC ID number of contributing
federal political committee. **C** C00384016

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34045.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	1

Transaction ID: SA11.14246675

Amount of Each Receipt this Period

28045.94

TRANSFER

IN-KIND: TRAVEL/EVENT SUP-
PLIES

SUBTOTAL of Receipts This Page (optional)

54045.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 589 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS

Mailing Address P.O. BOX 425

City State Zip Code
ROSWELL GA 30077-0425

FEC ID number of contributing
federal political committee. **C** C00386755

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221952

Amount of Each Receipt this Period

6000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
SANDY ADAMS FOR CONGRESS

Mailing Address PO BOX 1566

City State Zip Code
ORLANDO FL 32802-1566

FEC ID number of contributing
federal political committee. **C** C00463877

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211784

Amount of Each Receipt this Period

3000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PARKWAY

City State Zip Code
METAIRIE LA 70006-6532

FEC ID number of contributing
federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
43000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189720

Amount of Each Receipt this Period

5000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

14000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 590 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PARKWAY

City State Zip Code
METAIRIE LA 70006-6532

FEC ID number of contributing
federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
43000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229245

Amount of Each Receipt this Period

38000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)
SCHMIDT FOR CONGRESS COMMITTEE

Mailing Address 771 WARDS CORNER ROAD

City State Zip Code
LOVELAND OH 45140-9049

FEC ID number of contributing
federal political committee. **C** C00410647

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189716

Amount of Each Receipt this Period

10000.00

TRANSFER

C.

Full Name (Last, First, Middle Initial)
STEVE STIVERS FOR CONGRESS

Mailing Address 4679 WINTERSET DRIVE

City State Zip Code
COLUMBUS OH 43220-8113

FEC ID number of contributing
federal political committee. **C** C00441352

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
12000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211787

Amount of Each Receipt this Period

12000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

60000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.Full Name (Last, First, Middle Initial)
VOLUNTEERS FOR SHIMKUS

Mailing Address P.O. BOX 661

City	State	Zip Code
COLLINSVILLE	IL	62234-0661

FEC ID number of contributing
federal political committee.**C** C00258855

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Transaction ID: SA11.14216148

Amount of Each Receipt this Period

20000.00

TRANSFER

B.Full Name (Last, First, Middle Initial)
VOLUNTEERS FOR SHIMKUS

Mailing Address P.O. BOX 661

City	State	Zip Code
COLLINSVILLE	IL	62234-0661

FEC ID number of contributing
federal political committee.**C** C00258855

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	1

Transaction ID: SA11.14221949

Amount of Each Receipt this Period

12000.00

TRANSFER

C.Full Name (Last, First, Middle Initial)
WESTMORELAND FOR CONGRESS

Mailing Address P.O. BOX 458

City	State	Zip Code
SHARPSBURG	GA	30277-0458

FEC ID number of contributing
federal political committee.**C** C00409839

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA11.14194160

Amount of Each Receipt this Period

10000.00

TRANSFER

SUBTOTAL of Receipts This Page (optional)

42000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WESTMORELAND FOR CONGRESS

Mailing Address P.O. BOX 458

City

SHARPSBURG

State

GA

Zip Code

30277-0458

FEC ID number of contributing
federal political committee.

C

C00409839

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229243

Amount of Each Receipt this Period

5000.00

TRANSFER

B.

Full Name (Last, First, Middle Initial)

ACTON P. A. C.

Mailing Address PO BOX 442

City

SHARPSBURG

State

GA

Zip Code

30277-0442

FEC ID number of contributing
federal political committee.

C

C00411579

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189732

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

AMERICAN TRUCKING ASSOCIATION, PAC

Mailing Address 410 FIRST STREET SE

City

WASHINGTON

State

DC

Zip Code

20003-1819

FEC ID number of contributing
federal political committee.

C

C00002881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229225

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

25000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 593 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BABCOCK & WILCOX CO. PAC

Mailing Address 511 2ND STREET, NE

City

WASHINGTON

State

DC

Zip Code

20002-4916

FEC ID number of contributing
federal political committee.

C

C00365502

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14202354

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

CHECK SMART FINANCIAL PAC

Mailing Address 7001 POST RD. SUITE 200

City

DUBLIN

State

OH

Zip Code

43016-8334

FEC ID number of contributing
federal political committee.

C

C00433805

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14202352

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CIGNA CORPORATION, PAC

Mailing Address 601 PENNSYLVANIA AVENUE NW
S. BLDG. STE. 500

City

WASHINGTON

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.

C

C00085316

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189734

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

22500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 594 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CONSOL ENERGY, PAC

Mailing Address 1000 CONSOL ENERGY DRIVE
CNX CENTER

City State Zip Code
CANONSBURG PA 15317-6506

FEC ID number of contributing
federal political committee. **C** C00279331

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 1 1

Transaction ID: SA11.14216160

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

CORINTHIAN COLLEGES INC. PAC

Mailing Address 6 HUTTON CENTRE DRIVE
STE. 400

City State Zip Code
SANTA ANA CA 92707-8762

FEC ID number of contributing
federal political committee. **C** C00357640

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11.14194163

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CROPLIFE AMERICA PAC

Mailing Address 1156 15TH STREET, NW
STE. 400

City State Zip Code
WASHINGTON DC 20005-1752

FEC ID number of contributing
federal political committee. **C** C00248849

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211791

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

17500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 595 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FAA MANAGERS ASSOCIATION INC. PAC

Mailing Address 888 16TH STREET NW
SUITE 530

City State Zip Code
WASHINGTON DC 20006-4110

FEC ID number of contributing
federal political committee.

C C00366070

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229223

Amount of Each Receipt this Period

4000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

FAA MANAGERS ASSOCIATION INC. PAC

Mailing Address 888 16TH STREET NW
SUITE 530

City State Zip Code
WASHINGTON DC 20006-4110

FEC ID number of contributing
federal political committee.

C C00366070

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229224

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

FREE AND STRONG AMERICA PAC, INC.

Mailing Address P.O. BOX 79226

City State Zip Code
BELMONT MA 02479-0226

FEC ID number of contributing
federal political committee.

C C00449280

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11.14189724

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

20000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 596 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FREEDOM ADVANCEMENT FUND, PAC

Mailing Address 264 N. LUMPKIN STREET #202

City State Zip Code
ATHENS GA 30601-2832

FEC ID number of contributing
federal political committee. **C** C00490235

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA11.14221938

Amount of Each Receipt this Period

7500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION, PAC

Mailing Address 3190 FAIRVIEW PARK DRIVE

City State Zip Code
FALLS CHURCH VA 22042-4530

FEC ID number of contributing
federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11.14189717

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION, PAC

Mailing Address 3190 FAIRVIEW PARK DRIVE

City State Zip Code
FALLS CHURCH VA 22042-4530

FEC ID number of contributing
federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211790

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 597 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GOLDEN STATE PAC

Mailing Address 11355 W. OLYMPIC BLVD.

City

LOS ANGELES

State

CA

Zip Code

90064-1631

FEC ID number of contributing
federal political committee.

C

C00145342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198335

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS, PAC

Mailing Address 1750 NEW YORK AVENUE, NW

City

WASHINGTON

State

DC

Zip Code

20006-5305

FEC ID number of contributing
federal political committee.

C

C70003108

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194199

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

LAMARPAC

Mailing Address PO BOX 66338

City

BATON ROUGE

State

LA

Zip Code

70896-6338

FEC ID number of contributing
federal political committee.

C

C00174599

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198334

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

18500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NATIONAL BUSINESS AVIATION ASSOCIATION, INC., PAC

Mailing Address 1200 18TH STREET, NW
STE. 400

City	State	Zip Code
WASHINGTON	DC	20036-2527

FEC ID number of contributing
federal political committee.**C** C00319723

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	1	1

Transaction ID: SA11.14198331

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

NATIONAL RESTAURANT ASSOCIATION, PAC

Mailing Address 1200 17TH STREET NW

City	State	Zip Code
WASHINGTON	DC	20036-3004

FEC ID number of contributing
federal political committee.**C** C00003764

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	1	1

Transaction ID: SA11.14198333

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

NATIONAL THOROUGHBRED RACING ASSOCIATION, PAC

Mailing Address 2525 HARRODSBURG ROAD
STE. 400

City	State	Zip Code
LEXINGTON	KY	40504-3359

FEC ID number of contributing
federal political committee.**C** C00360008

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	1

Transaction ID: SA11.14231505

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

22500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 599 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NEWFIELD PAC

Mailing Address 363 NORTH SAM HOUSTON PARKWAY
STE. 100City State Zip Code
HOUSTON TX 77060-2405FEC ID number of contributing
federal political committee.**C** C00443523

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	1	1

Transaction ID: SA11.14194201

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

OUTDOOR ADVERTISING ASSOCIATION OF AMERICA PAC

Mailing Address 1850 M STREET, NW
STE. 1040City State Zip Code
WASHINGTON DC 20036-5821FEC ID number of contributing
federal political committee.**C** C00045781

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	1	1

Transaction ID: SA11.14198330

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

PEPSICO CONCERNED CITIZENS FUND, PAC

Mailing Address 700 ANDERSON HILL ROAD

City State Zip Code
PURCHASE NY 10577-1401FEC ID number of contributing
federal political committee.**C** C00039321

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	1	1

Transaction ID: SA11.14202350

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 600 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PFIZER, PAC

Mailing Address 325 7TH STREET, NW STE. 1200

City

WASHINGTON

State

DC

Zip Code

20004-2820

FEC ID number of contributing
federal political committee.**C**

C00016683

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11.14202351

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

PORTLAND CEMENT ASSOCIATION INC. PCA PAC

Mailing Address 500 NEW JERSEY AVE NW
7TH FL.

City

WASHINGTON

State

DC

Zip Code

20001-2005

FEC ID number of contributing
federal political committee.**C**

C00237065

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Transaction ID: SA11.14189731

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

R.O.S.K.A.M. PAC

Mailing Address 610 S. BOULEVARD

City

TAMPA

State

FL

Zip Code

33606-2693

FEC ID number of contributing
federal political committee.**C**

C00451294

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	1

Transaction ID: SA11.14221325

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

32500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 601 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SALLIE MAE, PAC

Mailing Address 701 PENNSYLVANIA AVENUE NW
STE. 560

City State Zip Code
WASHINGTON DC 20004-3200

FEC ID number of contributing
federal political committee.

C C00331835

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA11.14189733

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SANOFI-AVENTIS U.S. INC. PAC

Mailing Address 801 PENNSYLVANIA AVENUE NW
STE. 725

City State Zip Code
WASHINGTON DC 20004-3616

FEC ID number of contributing
federal political committee.

C C00144345

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA11.14229222

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

SENATE MAJORITY FUND

Mailing Address P.O. BOX 32025

City State Zip Code
PHOENIX AZ 85064-2025

FEC ID number of contributing
federal political committee.

C C00368431

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11.14198352

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

22500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 602 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SPECTRA ENERGY CORP PAC

Mailing Address 5400 WESTHEIMER COURT

City

HOUSTON

State

TX

Zip Code

77056-5353

FEC ID number of contributing
federal political committee.

C

C00429662

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11.14211792

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

SUPERVALU INC. PAC

Mailing Address P.O. BOX 20

City

BOISE

State

ID

Zip Code

83726-0020

FEC ID number of contributing
federal political committee.

C

C00243220

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14231506

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

TCF FINANCIAL PAC

Mailing Address 801 MARQUETTE AVENUE

City

MINNEAPOLIS

State

MN

Zip Code

55402-2807

FEC ID number of contributing
federal political committee.

C

C00218263

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11.14198332

Amount of Each Receipt this Period

7500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

17500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 603 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THE SHAW GROUP INC. PAC

Mailing Address 1725 DUKE STREET
STE. 400

City State Zip Code
ALEXANDRIA VA 22314-3470

FEC ID number of contributing
federal political committee.

C C00104885

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11.14194200

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

TIDEWATER, INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 POYDRAS STREET
SUITE 1900

City State Zip Code
NEW ORLEANS LA 70130-6040

FEC ID number of contributing
federal political committee.

C C00199471

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14229226

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

UNITEDHEALTH GROUP INC., PAC

Mailing Address 701 PENNSYLVANIA AVE., NW-SUITE 65

City State Zip Code
WASHINGTON DC 20004-3610

FEC ID number of contributing
federal political committee.

C C00274431

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11.14221948

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

21500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 604 / 760

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WADDELL & REED FINANCIAL PAC

Mailing Address 6300 LAMAR AVE

City

OVERLAND PARK

State

KS

Zip Code

66202-4247

FEC ID number of contributing
federal political committee.

C

C00340745

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: SA11.14202353

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

WAL-MART STORES, INC., PAC

Mailing Address 701 8TH STREET, NW, SUITE 200

City

WASHINGTON

State

DC

Zip Code

20001-3917

FEC ID number of contributing
federal political committee.

C

C00093054

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA11.14231507

Amount of Each Receipt this Period

15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

20000.00

TOTAL This Period (last page this line number only)

900735.94

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 605 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

AMERICAN VICTORY FUND 2010

Mailing Address 22780 INDIAN CREEK DRIVE
STE 100City State Zip Code
DULLES VA 20166FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

123809.09

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA12.AMV001

Amount of Each Receipt this Period

29864.66

TRANSFER OF JOINT FUNDRAI-
SING PROCEEDS**B.**

Full Name (Last, First, Middle Initial)

MARIO GARCIA

Mailing Address 3504 CRAGMONT DRIVE
STE 100City State Zip Code
TAMPA FL 33619-8300FEC ID number of contributing
federal political committee.

C

Name of Employer
EMSI - TAMPAOccupation
PRESIDENT/C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA12.14241834

Amount of Each Receipt this Period

30800.00

JFC ATTRIBUTION: AMERICAN
VICTORY FUND

[MEMO ITEM]

C.Full Name (Last, First, Middle Initial)
BOEHNER FOR SPEAKER COMMITTEE

Mailing Address 631-B PENNSYLVANIA AVENUE, SE

City State Zip Code
WASHINGTON DC 20003FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983069.81

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.BFS001

Amount of Each Receipt this Period

148842.82

TRANSFER OF JOINT FUNDRAI-
SING PROCEEDS

SUBTOTAL of Receipts This Page (optional)

178707.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 606 / 760

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. JOHN BERRY

Mailing Address 348 CROMWELL COURT

City

NAPLES

State

FL

Zip Code

34108-7719

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241830

Amount of Each Receipt this Period

2500.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MR. ALAN BREED

Mailing Address 34 ROCK RIDGE AVENUE

City

GREENWICH

State

CT

Zip Code

06831-4441

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDGEWOOD MANAGEMENT LLC

Occupation
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241832

Amount of Each Receipt this Period

25000.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MR. DAVID HOROWITZ

Mailing Address 27241 LA PAZ ROAD

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-3602

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOROWITZ MANAGEMENT

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241829

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 607 / 760

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. WILLIAM LAVERACK

Mailing Address 141 BRISCOE ROAD

City

NEW CANAAN

State

CT

Zip Code

06840-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation

INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241838

Amount of Each Receipt this Period

25000.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MR. STEPHEN LOCKWOOD

Mailing Address 9 ATLANTIC AVENUE

City

MARBLEHEAD

State

MA

Zip Code

01945-3230

FEC ID number of contributing
federal political committee.

C

Name of Employer
S.J. LOCKWOOD & CO. LLC

Occupation

C.E.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241839

Amount of Each Receipt this Period

25800.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MR. MICHAEL MCCALL

Mailing Address 41236 KELLEY ROAD

City

HEMPSTEAD

State

TX

Zip Code

77445-7744

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCCALL GIBSON & COMPANY
PLLC

Occupation

C.P.A.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241836

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 608 / 760

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. LORI MILKEN

Mailing Address 1250 FOURTH STREET
5TH FLOOR

City State Zip Code
 SANTA MONICA CA 90401-1418

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241835

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MRS. BARBARA W. MIXON

Mailing Address 3105 TOPPING LANE

City State Zip Code
 CHAGRIN FALLS OH 44022-6649

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241833

Amount of Each Receipt this Period

26600.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MS. KATHLEEN ROONEY

Mailing Address 2000 N STREET, NW
APT. 102

City State Zip Code
 WASHINGTON DC 20036-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241831

Amount of Each Receipt this Period

30800.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 609 / 760

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BUCKEYE PATRIOT PAC

Mailing Address 2525 NORTH LIMESTONE STREET
SUITE 103City State Zip Code
SPRINGFIELD OH 45503-1185FEC ID number of contributing
federal political committee.**C** C00239905

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA12.14241837

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: BOEHNER
FOR SPEAKER**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

DARRELL ISSA VICTORY FUND

Mailing Address 30151 TOMAS

City State Zip Code
RANCHO STA MARGARI CA 92688FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

41239.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Transaction ID: SA12.DIVF001

Amount of Each Receipt this Period

41239.00

TRANSFER OF JOINT FUNDRAI-
SING PROCEEDS**C.**

Full Name (Last, First, Middle Initial)

MR. BARRY CAREN

Mailing Address P.O. BOX 5365

City State Zip Code
CARSON CA 90749-5365FEC ID number of contributing
federal political committee.**C**Name of Employer
MAGNADYNE CORPOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Transaction ID: SA12.14241821

Amount of Each Receipt this Period

10000.00

JFC ATTRIBUTION: ISSA VIC-
TORY FUND**[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional)

41239.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 610 / 760

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MR. NIJAD I. FARES

Mailing Address P.O. BOX 130688

City

HOUSTON

State

TX

Zip Code

77219-0688

FEC ID number of contributing
federal political committee.

C

Name of Employer
LINK GROUP

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA12.14241822

Amount of Each Receipt this Period

30800.00

JFC ATTRIBUTION: ISSA VIC-
TORY FUND

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MR. RICHARD F. SPENCER

Mailing Address 5286 E HOME AVE

City

FRESNO

State

CA

Zip Code

93727-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPENCER ENTERPRISES, INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA12.14241823

Amount of Each Receipt this Period

20000.00

JFC ATTRIBUTION: ISSA VIC-
TORY FUND

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HARMER VICTORY FUND

Mailing Address PO BOX 365

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5988.43

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA12.HVF001

Amount of Each Receipt this Period

5988.43

TRANSFER OF JOINT FUNDRAI-
SING PROCEEDS

SUBTOTAL of Receipts This Page (optional)

5988.43

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 611 / 760

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. SANDRA COOK

Mailing Address 11870 N DAVIS ROAD

City

LOBI

State

CA

Zip Code

95242-9598

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA12.14241825

Amount of Each Receipt this Period

2000.00

JFC ATTRIBUTION: HARMER
VICTORY FUND

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

LYN A. WILCOX

Mailing Address 216 MEADOWSIDE PLACE

City

DANVILLE

State

CA

Zip Code

94526-2566

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFO REQUESTED AS PER BEST
EFFORTS

Occupation
INFO REQUESTED AS PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA12.14241826

Amount of Each Receipt this Period

4800.00

JFC ATTRIBUTION: HARMER
VICTORY FUND

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MRS. LYNDAM. WILSON

Mailing Address 325 MARKS RD

City

ALAMO

State

CA

Zip Code

94507-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 1 1

Transaction ID: SA12.14241824

Amount of Each Receipt this Period

2000.00

JFC ATTRIBUTION: HARMER
VICTORY FUND

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 612 / 760

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HARPER MAJORITY FUND

Mailing Address 120 NORTH CONGRESS STREET
STE 300

City State Zip Code
JACKSON MS 39205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14169.84

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.HMF001

Amount of Each Receipt this Period

14169.84

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B.

Full Name (Last, First, Middle Initial)

MR. TOMMY E. DULANEY

Mailing Address 5805 WINDSOR CIRCLE

City State Zip Code
MERIDIAN MS 39305-9705

FEC ID number of contributing
federal political committee.

C

Name of Employer
STRUCTURAL STEEL

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241828

Amount of Each Receipt this Period

5000.00

JFC ATTRIBUTION: HARPER MAJORITY FUND

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

MR. LARRY JOHNSON

Mailing Address P.O. BOX 12004

City State Zip Code
JACKSON MS 39236-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
LANDMARK HOMES

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: SA12.14241827

Amount of Each Receipt this Period

10000.00

JFC ATTRIBUTION: HARPER MAJORITY FUND

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

14169.84

TOTAL This Period (last page this line number only)

240104.75

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 613 / 760
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MRS. DIANE S. LAKE

Mailing Address 1200 TAM O'SHANTER DRIVE

City

BAKERSFIELD

State

CA

Zip Code

93309-2455

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Transaction ID: SA17.14194142

Amount of Each Receipt this Period

30800.00

CONTRIBUTION - RECOUNT FU-
ND

SUBTOTAL of Receipts This Page (optional)

30800.00

TOTAL This Period (last page this line number only)

30800.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 614 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
NEUGEBAUER CONGRESSIONAL COMMITTEE

Mailing Address P.O. BOX 54175

City LUBBOCK State TX Zip Code 79453-4175

Purpose of Disbursement
IN-KIND: TRAVEL/EVENT SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.14246675

Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

28045.94

B. Full Name (Last, First, Middle Initial)
JACKIE M BARBER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019089

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2489.54

C. Full Name (Last, First, Middle Initial)
JACKIE M BARBER

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019240

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2485.06

SUBTOTAL of Disbursements This Page (optional)

33020.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 615 / 760

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CREIGH BEHNKE

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019090

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1246.70

B.

Full Name (Last, First, Middle Initial)

CREIGH BEHNKE

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019241

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1247.77

C.

Full Name (Last, First, Middle Initial)

JONATHAN BENNETT

Mailing Address 320 FIRST STREET SE, 2ND FLOOR

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019018

Date of Disbursement

/ /

Amount of Each Disbursement this Period

21.56

SUBTOTAL of Disbursements This Page (optional)

2516.03

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 616 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JONATHAN BENNETT

Mailing Address 320 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019091

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Amount of Each Disbursement this Period

911.80

B.

Full Name (Last, First, Middle Initial)

JONATHAN BENNETT

Mailing Address 320 FIRST STREET SE, 2ND FLOOR

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019178

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Amount of Each Disbursement this Period

205.90

C.

Full Name (Last, First, Middle Initial)

JONATHAN BENNETT

Mailing Address 320 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019242

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Amount of Each Disbursement this Period

899.46

SUBTOTAL of Disbursements This Page (optional)

2017.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 617 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHRISTOPHER BILLETER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019243

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1360.44

B.

Full Name (Last, First, Middle Initial)

JONATHAN R BLACK

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019092

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

3550.33

C.

Full Name (Last, First, Middle Initial)

JONATHAN R BLACK

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019244

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

3538.00

SUBTOTAL of Disbursements This Page (optional)

8448.77

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 618 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MICHAEL F BOBER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019093

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2781.34

B.

Full Name (Last, First, Middle Initial)

MICHAEL F BOBER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019245

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2769.00

C.

Full Name (Last, First, Middle Initial)

KEVIN BOLAND

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019094

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

653.08

SUBTOTAL of Disbursements This Page (optional)

6203.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 619 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

KEVIN BOLAND

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019246

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

648.61

B.

Full Name (Last, First, Middle Initial)

ANDREA BOZEK

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019095

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1711.62

C.

Full Name (Last, First, Middle Initial)

ANDREA BOZEK

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019247

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1707.14

SUBTOTAL of Disbursements This Page (optional)

4067.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 620 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WHITNEY BRIGHTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019096

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

859.16

B.

Full Name (Last, First, Middle Initial)

WHITNEY BRIGHTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019179

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

23.43

C.

Full Name (Last, First, Middle Initial)

WHITNEY BRIGHTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019248

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

854.70

SUBTOTAL of Disbursements This Page (optional)

1737.29

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 621 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOANNA BURGOS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019101

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2913.02

B.

Full Name (Last, First, Middle Initial)

JOANNA BURGOS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019249

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2900.67

C.

Full Name (Last, First, Middle Initial)

JEFFREY BURTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019098

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

4513.47

SUBTOTAL of Disbursements This Page (optional)

10327.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 622 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JEFFREY BURTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019250

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

4501.14

B.

Full Name (Last, First, Middle Initial)

JEFFREY J BURTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019077

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

115.00

C.

Full Name (Last, First, Middle Initial)

ERIM V CANLIGIL

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019099

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1275.23

SUBTOTAL of Disbursements This Page (optional)

5891.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 623 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ERIM V CANLIGIL	Transaction ID: SB21-0.019251 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">1270.77</td> </tr> </table>	1270.77																			
1270.77																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) RYAN CARNEY	Transaction ID: SB21-0.019100 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">3227.75</td> </tr> </table>	3227.75																			
3227.75																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) RYAN CARNEY	Transaction ID: SB21-0.019182 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">445.29</td> </tr> </table>	445.29																			
445.29																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4943.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 624 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RYAN CARNEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019252

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

3215.41

B.

Full Name (Last, First, Middle Initial)

CHRIS CARR

Mailing Address 2267 DESERT PRAIRIE ST

City
LAS VEGAS

State
NV

Zip Code
89135

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.018979

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

CHRIS CARR

Mailing Address 2267 DESERT PRAIRIE ST

City
LAS VEGAS

State
NV

Zip Code
89135

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019081

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

973.87

SUBTOTAL of Disbursements This Page (optional)

9189.28

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 625 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

STEPHEN CASSIDY

Mailing Address 320 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019102

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Amount of Each Disbursement this Period

1083.12

B.

Full Name (Last, First, Middle Initial)

STEPHEN CASSIDY

Mailing Address 320 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019253

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	2	/	2	0	1	1

Amount of Each Disbursement this Period

1078.65

C.

Full Name (Last, First, Middle Initial)

ALLISON COCCIA

Mailing Address 320 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019103

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Amount of Each Disbursement this Period

2020.36

SUBTOTAL of Disbursements This Page (optional)

4182.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 626 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ALLISON COCCIA

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019254

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2015.91

B.

Full Name (Last, First, Middle Initial)

ASHLEY CRAIG

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019104

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1020.46

C.

Full Name (Last, First, Middle Initial)

ASHLEY CRAIG

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019255

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1015.98

SUBTOTAL of Disbursements This Page (optional)

4052.35

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 628 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ERICA CROCKER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.018981

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

6595.65

B.

Full Name (Last, First, Middle Initial)

CALEB F CROSBY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019106

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

4552.86

C.

Full Name (Last, First, Middle Initial)

CALEB F CROSBY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019256

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

4540.51

SUBTOTAL of Disbursements This Page (optional)

15689.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LUCY CROXTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019107

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1144.38

B.

Full Name (Last, First, Middle Initial)

LUCY CROXTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019258

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1139.91

C.

Full Name (Last, First, Middle Initial)

LUCY NOELL CROXTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019002

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

992.88

SUBTOTAL of Disbursements This Page (optional)

3277.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 630 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LUCY NOELL CROXTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019332

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

120.00

B.

Full Name (Last, First, Middle Initial)

MEGAN CUMMINGS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019108

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2251.46

C.

Full Name (Last, First, Middle Initial)

MEGAN CUMMINGS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019261

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2246.98

SUBTOTAL of Disbursements This Page (optional)

4618.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 631 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BRITTANY CURLEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019109

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1252.73

B.

Full Name (Last, First, Middle Initial)

BRITTANY CURLEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019260

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1248.26

C.

Full Name (Last, First, Middle Initial)

EMILY DAVIS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019110

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2459.50

SUBTOTAL of Disbursements This Page (optional)

4960.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 632 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

EMILY DAVIS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019262

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2455.03

B.

Full Name (Last, First, Middle Initial)

JORDAN N DAVIS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019111

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2435.64

C.

Full Name (Last, First, Middle Initial)

JORDAN N DAVIS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019263

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2423.30

SUBTOTAL of Disbursements This Page (optional)

7313.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 633 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ROBERT DAY

Mailing Address 865 S FIGUEROA ST
SUITE 1800

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
CATERING/PARKING SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019025

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

4924.18

B.

Full Name (Last, First, Middle Initial)

LEAH DOW

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019113

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

995.48

C.

Full Name (Last, First, Middle Initial)

LEAH DOW

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019264

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

991.01

SUBTOTAL of Disbursements This Page (optional)

6910.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 634 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THOMAS J DUNN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019114

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2216.34

B.

Full Name (Last, First, Middle Initial)

THOMAS J DUNN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019265

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2211.87

C.

Full Name (Last, First, Middle Initial)

GEOFFREY EMBLER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019116

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

3594.90

SUBTOTAL of Disbursements This Page (optional)

8023.11

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 635 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GEOFFREY EMBLER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019266

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

3594.90

B.

Full Name (Last, First, Middle Initial)

SEAN FINNERTY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019115

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1093.98

C.

Full Name (Last, First, Middle Initial)

SEAN FINNERTY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019267

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1089.52

SUBTOTAL of Disbursements This Page (optional)

5778.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 636 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NICHOLAS FLOCKEN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019117

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

320.22

B.

Full Name (Last, First, Middle Initial)

NICHOLAS FLOCKEN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019281

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

590.81

C.

Full Name (Last, First, Middle Initial)

GABRIELE FORSYTH

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019005

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

37.25

SUBTOTAL of Disbursements This Page (optional)

948.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 637 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GABRIELE FORSYTH

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019118

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2404.50

B.

Full Name (Last, First, Middle Initial)

GABRIELE FORSYTH

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019269

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2400.03

C.

Full Name (Last, First, Middle Initial)

SAMUEL FOSDICK

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019119

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

986.73

SUBTOTAL of Disbursements This Page (optional)

5791.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 638 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SAMUEL FOSDICK

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019270

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

982.26

B.

Full Name (Last, First, Middle Initial)

COREY FRITZ

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019120

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

659.95

C.

Full Name (Last, First, Middle Initial)

COREY FRITZ

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019271

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

655.48

SUBTOTAL of Disbursements This Page (optional)

2297.69

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 639 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) JESSICA C FURST	Transaction ID: SB21-0.019006 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	7		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">112.40</td> </tr> </table>	112.40																			
112.40																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) JESSICA C FURST	Transaction ID: SB21-0.019121 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">4107.10</td> </tr> </table>	4107.10																			
4107.10																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) JESSICA C FURST	Transaction ID: SB21-0.019272 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">4102.64</td> </tr> </table>	4102.64																			
4102.64																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

8322.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 640 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BRANDON GRAVLEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019188

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

317.67

B.

Full Name (Last, First, Middle Initial)

GEORGE G GRIFFIN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019126

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2869.79

C.

Full Name (Last, First, Middle Initial)

GEORGE G GRIFFIN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019273

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2857.45

SUBTOTAL of Disbursements This Page (optional)

6044.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 641 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ORRIN L HARRISON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019008

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

158.92

B.

Full Name (Last, First, Middle Initial)

ORRIN L HARRISON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019014

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

20.00

C.

Full Name (Last, First, Middle Initial)

ORRIN L HARRISON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019123

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

4622.18

SUBTOTAL of Disbursements This Page (optional)

4801.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 642 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ORRIN L HARRISON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019274

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

4609.84

B.

Full Name (Last, First, Middle Initial)

KAYLEE HEATHCOTT

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019127

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1144.38

C.

Full Name (Last, First, Middle Initial)

KAYLEE HEATHCOTT

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019275

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1139.91

SUBTOTAL of Disbursements This Page (optional)

6894.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 643 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HEATHER HENDERSON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019128

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2755.99

B.

Full Name (Last, First, Middle Initial)

HEATHER HENDERSON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019276

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2751.52

C.

Full Name (Last, First, Middle Initial)

LIESL HICKEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019125

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

3741.28

SUBTOTAL of Disbursements This Page (optional)

9248.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 644 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LIESL HICKEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019277

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

3728.93

B.

Full Name (Last, First, Middle Initial)

TYLER HOULTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019129

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1902.77

C.

Full Name (Last, First, Middle Initial)

TYLER HOULTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019278

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1898.29

SUBTOTAL of Disbursements This Page (optional)

7529.99

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 646 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CURTIS ISAKSON	Transaction ID: SB21-0.019279 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">1613.58</td> </tr> </table>	1613.58																			
1613.58																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) CURTIS ISAKSON	Transaction ID: SB21-0.019335 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td colspan="10">3001.04</td> </tr> </table>	3001.04																			
3001.04																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) JAMES R JETTON	Transaction ID: SB21-0.019131 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">2573.52</td> </tr> </table>	2573.52																			
2573.52																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7188.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 647 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JAMES R JETTON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019280

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2475.04

B.

Full Name (Last, First, Middle Initial)

TODD R JOHNSON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019132

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2243.46

C.

Full Name (Last, First, Middle Initial)

TODD R JOHNSON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019282

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2238.99

SUBTOTAL of Disbursements This Page (optional)

6957.49

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 648 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ROBERT JONES

Transaction ID: SB21-0.019133

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Mailing Address 320 1ST ST SE

Amount of Each Disbursement this Period

1275.74

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

ROBERT JONES

Transaction ID: SB21-0.019283

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Mailing Address 320 1ST ST SE

Amount of Each Disbursement this Period

1271.27

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

ERIC JOYNER

Transaction ID: SB21-0.019134

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Mailing Address 320 1ST ST SE

Amount of Each Disbursement this Period

1433.11

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3980.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 649 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ERIC JOYNER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019284

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1428.64

B.

Full Name (Last, First, Middle Initial)

MARY E KAHLSTORF

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019135

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1759.46

C.

Full Name (Last, First, Middle Initial)

MARY E KAHLSTORF

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019285

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1754.99

SUBTOTAL of Disbursements This Page (optional)

4943.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 650 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MICHAEL R KAPLAN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019136

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1281.23

B.

Full Name (Last, First, Middle Initial)

MICHAEL R KAPLAN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019286

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1276.76

C.

Full Name (Last, First, Middle Initial)

CHRISTYN KEYES

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019137

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1135.19

SUBTOTAL of Disbursements This Page (optional)

3693.18

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 651 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHRISTYN KEYES

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019287

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1130.73

B.

Full Name (Last, First, Middle Initial)

ADAM KINCAID

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019138

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2485.93

C.

Full Name (Last, First, Middle Initial)

ADAM KINCAID

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019288

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2473.58

SUBTOTAL of Disbursements This Page (optional)

6090.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 652 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ROBYN KNECHT	Transaction ID: SB21-0.019140 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>1</td><td>6</td><td>5</td><td>9</td><td>.</td><td>6</td><td>5</td> </tr> </table>	1	6	5	9	.	6	5													
1	6	5	9	.	6	5															
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) ROBYN KNECHT	Transaction ID: SB21-0.019192 Date of Disbursement																				
Mailing Address 320 1ST ST	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL	<table border="1"> <tr> <td>5</td><td>2</td><td>.</td><td>9</td><td>7</td> </tr> </table>	5	2	.	9	7															
5	2	.	9	7																	
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) ROBYN KNECHT	Transaction ID: SB21-0.019289 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>1</td><td>6</td><td>5</td><td>5</td><td>.</td><td>1</td><td>8</td> </tr> </table>	1	6	5	5	.	1	8													
1	6	5	5	.	1	8															
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3367.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 653 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JANICE L KNOPP

Mailing Address 236 KENTUCKY AVE SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.018984

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

7500.00

B.

Full Name (Last, First, Middle Initial)

THEODORE KWONG

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019142

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1384.92

C.

Full Name (Last, First, Middle Initial)

THEODORE KWONG

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019290

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1384.92

SUBTOTAL of Disbursements This Page (optional)

10269.84

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 654 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

COLIN LARSON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019141

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1275.74

B.

Full Name (Last, First, Middle Initial)

COLIN LARSON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019291

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1271.27

C.

Full Name (Last, First, Middle Initial)

ALEXANDER LAWHON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019143

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

3323.78

SUBTOTAL of Disbursements This Page (optional)

5870.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 655 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ALEXANDER LAWHON

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019193

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

1728.78

B.

Full Name (Last, First, Middle Initial)

ALEXANDER LAWHON

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019292

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

3311.44

C.

Full Name (Last, First, Middle Initial)

ALEXANDER LAWHON

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019357

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

76.33

SUBTOTAL of Disbursements This Page (optional)

5116.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 656 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) SHAUN LEDGERWOOD	Transaction ID: SB21-0.019144 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">2151.61</td> </tr> </table>	2151.61																			
2151.61																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) SHAUN LEDGERWOOD	Transaction ID: SB21-0.019293 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">2139.28</td> </tr> </table>	2139.28																			
2139.28																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) PAUL A LINDSAY	Transaction ID: SB21-0.019145 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">3703.25</td> </tr> </table>	3703.25																			
3703.25																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7994.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 657 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) PAUL A LINDSAY	Transaction ID: SB21-0.019294 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>3</td><td>6</td><td>9</td><td>8</td><td>.</td><td>7</td><td>8</td> </tr> </table>	3	6	9	8	.	7	8													
3	6	9	8	.	7	8															
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) BROCK LOWRENCE	Transaction ID: SB21-0.019146 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>9</td><td>8</td><td>4</td><td>.</td><td>3</td><td>8</td> </tr> </table>	9	8	4	.	3	8														
9	8	4	.	3	8																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) BROCK LOWRENCE	Transaction ID: SB21-0.019295 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>9</td><td>8</td><td>4</td><td>.</td><td>3</td><td>7</td> </tr> </table>	9	8	4	.	3	7														
9	8	4	.	3	7																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5667.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 658 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHRISTINE MARTIN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.018987

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

SALVATORE MAZZOLA

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019147

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2235.75

C.

Full Name (Last, First, Middle Initial)

SALVATORE MAZZOLA

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019297

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2223.41

SUBTOTAL of Disbursements This Page (optional)

6459.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 659 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BROCK MCCLEARY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019148

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

3304.93

B.

Full Name (Last, First, Middle Initial)

BROCK MCCLEARY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019298

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

3292.59

C.

Full Name (Last, First, Middle Initial)

KEVIN W MCGRANN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019085

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

3450.37

SUBTOTAL of Disbursements This Page (optional)

10047.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 660 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) KEVIN W MCGRANN	Transaction ID: SB21-0.019151 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>6</td><td>3</td><td>5</td><td>.</td><td>6</td><td>0</td> </tr> </table>	6	3	5	.	6	0														
6	3	5	.	6	0																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) KEVIN W MCGRANN	Transaction ID: SB21-0.019299 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>6</td><td>3</td><td>1</td><td>.</td><td>1</td><td>3</td> </tr> </table>	6	3	1	.	1	3														
6	3	1	.	1	3																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) CHRISTOPHER MCNULTY	Transaction ID: SB21-0.019150 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>2</td><td>8</td><td>4</td><td>.</td><td>9</td><td>5</td> </tr> </table>	2	8	4	.	9	5														
2	8	4	.	9	5																
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4116.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 661 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHRISTOPHER MCNULTY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019300

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2837.19

B.

Full Name (Last, First, Middle Initial)

CATHERINE K MILLER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019152

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2121.47

C.

Full Name (Last, First, Middle Initial)

CATHERINE K MILLER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019301

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2117.00

SUBTOTAL of Disbursements This Page (optional)

7075.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 662 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BENJAMIN M OTTENHOFF

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019154

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

3097.18

B.

Full Name (Last, First, Middle Initial)

BENJAMIN M OTTENHOFF

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019302

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

3084.84

C.

Full Name (Last, First, Middle Initial)

LIBRADO PADILLA

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019155

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2734.02

SUBTOTAL of Disbursements This Page (optional)

8916.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 663 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LIBRADO PADILLA

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019303

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

2729.55

B.

Full Name (Last, First, Middle Initial)

LIBRADO PADILLA

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019340

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

535.90

C.

Full Name (Last, First, Middle Initial)

JOHN RANDALL

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019344

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

101.98

SUBTOTAL of Disbursements This Page (optional)

3367.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 664 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN R RANDALL

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019156

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3281.81

B.

Full Name (Last, First, Middle Initial)

JOHN R RANDALL

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019304

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3269.47

C.

Full Name (Last, First, Middle Initial)

CELIA RILEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019086

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1475.72

SUBTOTAL of Disbursements This Page (optional)

8027.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 665 / 760

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CELIA RILEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019157

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1786.15

B.

Full Name (Last, First, Middle Initial)

CELIA RILEY

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019308

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1781.68

C.

Full Name (Last, First, Middle Initial)

JOHN ROGERS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019158

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

2350.05

SUBTOTAL of Disbursements This Page (optional)

5917.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 666 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN ROGERS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019309

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2345.58

B.

Full Name (Last, First, Middle Initial)

JESSE H ROMAN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019159

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1177.81

C.

Full Name (Last, First, Middle Initial)

JESSE H ROMAN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019306

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1173.34

SUBTOTAL of Disbursements This Page (optional)

4696.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 667 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PABLO SANCHEZ

Mailing Address 1032 N DANVILLE ST

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
PERSONNEL SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.018993

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

5750.00

B.

Full Name (Last, First, Middle Initial)

JOSEPH G SCIARRINO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019160

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1207.31

C.

Full Name (Last, First, Middle Initial)

JOSEPH G SCIARRINO

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019307

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1202.84

SUBTOTAL of Disbursements This Page (optional)

8160.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 668 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JENNIFER S SHEFFIELD

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019040

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

1089.39

B.

Full Name (Last, First, Middle Initial)

JENNIFER S SHEFFIELD

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019161

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

4308.07

C.

Full Name (Last, First, Middle Initial)

JENNIFER S SHEFFIELD

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019310

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

4303.61

SUBTOTAL of Disbursements This Page (optional)

9701.07

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 669 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MIKE S SHIELDS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019013

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

1442.16

B.

Full Name (Last, First, Middle Initial)

MIKE S SHIELDS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019162

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

4994.89

C.

Full Name (Last, First, Middle Initial)

MIKE S SHIELDS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019311

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

4982.56

SUBTOTAL of Disbursements This Page (optional)

11419.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 670 / 760

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

VIKRAM SRINIVASAN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019163

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1468.35

B.

Full Name (Last, First, Middle Initial)

VIKRAM SRINIVASAN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019312

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1463.88

C.

Full Name (Last, First, Middle Initial)

SCOTT STEARNS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.018994

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

4432.23

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 671 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SAVANNAH R STEELE

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019164

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1356.40

B.

Full Name (Last, First, Middle Initial)

SAVANNAH R STEELE

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019313

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1351.93

C.

Full Name (Last, First, Middle Initial)

KAYLA SULZER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019165

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1246.70

SUBTOTAL of Disbursements This Page (optional)

3955.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

KAYLA SULZER

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019314

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1242.23

B.

Full Name (Last, First, Middle Initial)

HOLLY THURMOND

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019166

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

1356.06

C.

Full Name (Last, First, Middle Initial)

HOLLY THURMOND

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019317

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

1351.57

SUBTOTAL of Disbursements This Page (optional)

3949.86

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HOLLY THURMOND

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019364

Date of Disbursement

/ /

Amount of Each Disbursement this Period

109.87

B.

Full Name (Last, First, Middle Initial)

GREG WALDEN

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019220

Date of Disbursement

/ /

Amount of Each Disbursement this Period

167.00

C.

Full Name (Last, First, Middle Initial)

DAVID WATTS

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019168

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2709.27

SUBTOTAL of Disbursements This Page (optional)

2986.14

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 674 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DAVID WATTS

Mailing Address 320 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019319

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	2	/	2	0	1	1

Amount of Each Disbursement this Period

2696.93

B.

Full Name (Last, First, Middle Initial)

KATHERINE WILLIAMS

Mailing Address 320 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019169

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	1

Amount of Each Disbursement this Period

1027.15

C.

Full Name (Last, First, Middle Initial)

KATHERINE WILLIAMS

Mailing Address 320 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
PAYROLL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019320

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	2	/	2	0	1	1

Amount of Each Disbursement this Period

1022.68

SUBTOTAL of Disbursements This Page (optional)

4746.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: SB21-0.019170 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">1433.12</td> </tr> </table>	1433.12																			
1433.12																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: SB21-0.019321 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">1428.64</td> </tr> </table>	1428.64																			
1428.64																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) JOE N WYNN, JR	Transaction ID: SB21-0.019171 Date of Disbursement																				
Mailing Address 320 1ST ST SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td colspan="10">1391.43</td> </tr> </table>	1391.43																			
1391.43																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4253.19

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 676 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOE N WYNN, JR

Mailing Address 320 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019322

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1386.96

B.

Full Name (Last, First, Middle Initial)

ACE BEVERAGE

Mailing Address 3301 NEW MEXICO AVE NW

City
WASHINGTON

State
DC

Zip Code
20016

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019222

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12527.45

C.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address PO BOX 1270

City
NEWARK

State
NJ

Zip Code
07101-1270

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019368

Date of Disbursement

/ /

Amount of Each Disbursement this Period

71379.87

SUBTOTAL of Disbursements This Page (optional)

85294.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 677 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

2CHECKOUT.COM

Mailing Address 1785 OBRIEN RD

City
COLUMBUS

State
OH

Zip Code
43228

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022685

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

ADEK PRODUCTIONS

Mailing Address 1801 WEST STREET
STE 105

City
ANNAPOLIS

State
MD

Zip Code
21401

Purpose of Disbursement
STAGING/AUDIO/VISUAL SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022687

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

1184.10

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

AIR DELIGHTS

Mailing Address 9974 SW ARCTIC DR

City
BEAVERTON

State
OR

Zip Code
97005

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022689

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

78.94

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 678 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

AMAZON.COM

Mailing Address 1200 12TH AVE

City
SEATTLE

State
WA

Zip Code
98144

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022691

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

212.80

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address PO BOX 620081

City
DALLAS

State
TX

Zip Code
75262

Purpose of Disbursement
CREDIT - TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022692

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

-1789.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NW

City
WASHINGTON

State
DC

Zip Code
20002

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022724

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

1616.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 679 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANDY STERNS FURNITURE

Mailing Address 1050 17TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
FURNITURE PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022726

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

1852.94

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
APPLE INC

Mailing Address 1 INFINITE LOOP

City CUPERTINO State CA Zip Code 95014

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022728

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

40.74

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
AT&T MOBILITY

Mailing Address PO BOX 6463

City CAROL STREAM State IL Zip Code 60197-6463

Purpose of Disbursement
PHONE SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022730

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 681 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CARMINES DC

Mailing Address 425 7TH ST NW

City
WASHINGTON

State
DC

Zip Code
20004

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022738

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

8540.07

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

CHICK-FIL-A

Mailing Address 5200 BUFFINGTON RD

City
ATLANTA

State
GA

Zip Code
30349

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022740

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

128.16

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

CONTINENTAL AIRLINES

Mailing Address PO BOX 4658

City
HOUSTON

State
TX

Zip Code
77210-4658

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022742

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

784.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 682 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

COSI

Mailing Address 1751 LAKE COOK RD

City
CHICAGO

State
IL

Zip Code
60015

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022744

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

104.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

FACEBOOK

Mailing Address 1601 S CALIFORNIA AVE

City
PALO ALTO

State
CA

Zip Code
94304

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022746

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

FACEBOOK

Mailing Address 1601 S CALIFORNIA AVE

City
PALO ALTO

State
CA

Zip Code
94304

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022748

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

70.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FACEBOOK

Mailing Address 1601 S CALIFORNIA AVE

City PALO ALTO State CA Zip Code 94304

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022750

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

FACEBOOK

Mailing Address 1601 S CALIFORNIA AVE

City PALO ALTO State CA Zip Code 94304

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022752

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

29.47

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

FACEBOOK

Mailing Address 1601 S CALIFORNIA AVE

City PALO ALTO State CA Zip Code 94304

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022754

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

20.09

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 684 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.	<p>Full Name (Last, First, Middle Initial) FACEBOOK</p> <p>Mailing Address 1601 S CALIFORNIA AVE</p> <p>City PALO ALTO State CA Zip Code 94304</p> <p>Purpose of Disbursement WEB SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.022756 Date of Disbursement <div> <div>04</div> <div>01</div> <div>2011</div> </div> </p> <p>Amount of Each Disbursement this Period <div>3.88</div></p> <p>[MEMO ITEM]</p>
B.	<p>Full Name (Last, First, Middle Initial) FACEBOOK</p> <p>Mailing Address 1601 S CALIFORNIA AVE</p> <p>City PALO ALTO State CA Zip Code 94304</p> <p>Purpose of Disbursement WEB SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.022758 Date of Disbursement <div> <div>04</div> <div>01</div> <div>2011</div> </div> </p> <p>Amount of Each Disbursement this Period <div>4.20</div></p> <p>[MEMO ITEM]</p>
C.	<p>Full Name (Last, First, Middle Initial) FINEAWARDS.COM</p> <p>Mailing Address 250 N DIXIE HWY STE 10</p> <p>City HOLLYWOOD State FL Zip Code 33020</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.022760 Date of Disbursement <div> <div>04</div> <div>01</div> <div>2011</div> </div> </p> <p>Amount of Each Disbursement this Period <div>231.72</div></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 686 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
HARRIS TEETER GROCERY STORES

Mailing Address 701 CRESTDAL DR

City State Zip Code
MATTHEWS NC 28105

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022768

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Amount of Each Disbursement this Period

113.19

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
HASLER FINANCIAL SERVICES

Mailing Address PO BOX 45850

City State Zip Code
SAN FRANCISCO CA 94145

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022770

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Amount of Each Disbursement this Period

192.83

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
HILTON HOTELS CORP

Mailing Address 7930 JONES BRANCH DR, STE 1100

City State Zip Code
MCLEAN VA 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022772

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 1 1

Amount of Each Disbursement this Period

712.82

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HILTON HOTELS CORP

Mailing Address 7930 JONES BRANCH DR, STE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022774

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

693.22

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

HILTON HOTELS CORP

Mailing Address 7930 JONES BRANCH DR, STE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022776

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

214.32

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

HILTON HOTELS CORP

Mailing Address 7930 JONES BRANCH DR, STE 1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022778

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

428.64

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 688 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

INTER MARKETS INC

Mailing Address 344 MAPLE AVE WEST
STE 318

City VIENNA State VA Zip Code 22180

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022780

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

2600.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

LAMPS PLUS

Mailing Address 20250 PLUMMER ST

City CHATSWORTH State CA Zip Code 91311

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022782

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

87.98

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

LEADERSHIP DIRECTORIES INC

Mailing Address 104 5TH AVE, 3RD FLOOR

City NEW YORK State NY Zip Code 10011

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022784

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

5000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MAC BUSINESS SOLUTIONS

Mailing Address **9057 GAITHER RD**

City **GAITHERSBURG** State **MD** Zip Code **20877**

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022786

Date of Disbursement

/ /

Amount of Each Disbursement this Period

172.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MAIL CHIMP

Mailing Address **512 MEANS ST
STE 404**

City **ATLANTA** State **GA** Zip Code **30318**

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022788

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MWAVE COMPUTERS

Mailing Address **20153 PASEO DEL PRADO**

City **WALNUT** State **CA** Zip Code **91789**

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022790

Date of Disbursement

/ /

Amount of Each Disbursement this Period

181.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 690 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) NEW EGG.COM	Transaction ID: SB21-0.022794 Date of Disbursement																				
Mailing Address 16839 E GALA AVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	1												
City State Zip Code INDUSTRY CA 91745	Amount of Each Disbursement this Period																				
Purpose of Disbursement COMPUTER SUPPORT	<table border="1"> <tr> <td>301.03</td> </tr> </table>	301.03																			
301.03																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) PIZZA BOLIS	Transaction ID: SB21-0.022796 Date of Disbursement																				
Mailing Address 5725 FALLS RD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	1												
City State Zip Code BALTIMORE MD 21209	Amount of Each Disbursement this Period																				
Purpose of Disbursement FOOD/BEVERAGE	<table border="1"> <tr> <td>62.60</td> </tr> </table>	62.60																			
62.60																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) RASMUSSEN REPORTS	Transaction ID: SB21-0.022798 Date of Disbursement																				
Mailing Address 625 COOKMAN AVE STE 2	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	1												
City State Zip Code ASBURY PARK NJ 07712	Amount of Each Disbursement this Period																				
Purpose of Disbursement SUBSCRIPTIONS	<table border="1"> <tr> <td>19.95</td> </tr> </table>	19.95																			
19.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 691 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
REGAL LIMOUSINE SERVICE

Mailing Address 7828 MULBERRY BOTTOM LN

City State Zip Code
SPRINGFIELD VA 22153

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022800

Date of Disbursement

/ /

Amount of Each Disbursement this Period

43.77

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
ROGERS GARDENS

Mailing Address 2301 SAN JOAQUIN HILLS RD

City State Zip Code
CORONA DEL MAR CA 92625

Purpose of Disbursement
DECORATIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022802

Date of Disbursement

/ /

Amount of Each Disbursement this Period

233.81

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
ROLANDS OF CAPITOL HILL

Mailing Address 333 PENNSYLVANIA AVE SE

City State Zip Code
WASHINGTON DC 20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022804

Date of Disbursement

/ /

Amount of Each Disbursement this Period

68.60

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 692 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SARIANA LLC

Mailing Address 5450 COMPLEX ST
UNIT 306

City SAN DIEGO State CA Zip Code 92123

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022806

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

45.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022808

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

173.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

STAPLES CREDIT PLAN

Mailing Address 8725 W SAHARA

City LAS VEGAS State NV Zip Code 89163

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022810

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

591.92

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

[MEMO ITEM]

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 694 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

STAPLES CREDIT PLAN

Mailing Address 8725 W SAHARA

City
LAS VEGAS

State
NV

Zip Code
89163

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022818

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

47.69

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SWREG INC

Mailing Address 9625 W 76TH ST

City
EDEN PRAIRIE

State
MN

Zip Code
55344

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022820

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

TASTE CATERING

Mailing Address 1600 FITZGERALD LN

City
ALEXANDRIA

State
VA

Zip Code
22302

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022822

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

1134.79

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 695 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THE NEW YORK PALACE HOTEL

Mailing Address 455 MADISON AVE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022792

Date of Disbursement

/ /

Amount of Each Disbursement this Period

13750.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

THE WESTIN DC CITY CENTER

Mailing Address 1400 M ST NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022890

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1328.58

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

TORTILLA COAST

Mailing Address 400 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.022866

Date of Disbursement

/ /

Amount of Each Disbursement this Period

95.67

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 696 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TORTILLA COAST

Mailing Address 400 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022868

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

189.13

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address PO BOX 7247-0244

City
PHILADELPHIA

State
PA

Zip Code
19170-0001

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022870

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

170.72

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address PO BOX 7247-0244

City
PHILADELPHIA

State
PA

Zip Code
19170-0001

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022872

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

284.76

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 697 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address PO BOX 7247-0244

City
PHILADELPHIA

State
PA

Zip Code
19170-0001

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022874

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

357.89

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address PO BOX 7247-0244

City
PHILADELPHIA

State
PA

Zip Code
19170-0001

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022876

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

256.26

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address PO BOX 7247-0244

City
PHILADELPHIA

State
PA

Zip Code
19170-0001

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022878

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

103.44

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 698 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address PO BOX 7247-0244

City
PHILADELPHIA

State
PA

Zip Code
19170-0001

Purpose of Disbursement
DELIVERY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022880

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

183.37

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 2345 CRYSTAL DR

City
ARLINGTON

State
VA

Zip Code
22227

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022886

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

417.90

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 2345 CRYSTAL DR

City
ARLINGTON

State
VA

Zip Code
22227

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022888

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

277.70

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 699 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
US POSTMASTER

Mailing Address **900 BRENTWOOD ROAD NE**

City **WASHINGTON** State **DC** Zip Code **20018-1004**

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: **SB21-0.022882**
Date of Disbursement

/ /

Amount of Each Disbursement this Period

308.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
US POSTMASTER

Mailing Address **900 BRENTWOOD ROAD NE**

City **WASHINGTON** State **DC** Zip Code **20018-1004**

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: **SB21-0.022884**
Date of Disbursement

/ /

Amount of Each Disbursement this Period

183.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
VINE CLIFF WINERY

Mailing Address **7400 SILVERADO TR**

City **NAPA** State **CA** Zip Code **94558**

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: **SB21-0.022894**
Date of Disbursement

/ /

Amount of Each Disbursement this Period

179.63

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 700 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WASHINGTON METRO AREA TRANSIT AUTHORITY

Mailing Address 600 5TH ST NW

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.022892

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

3878.85

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS MERCHANT ACCOUNT

Mailing Address PO BOX 981532

City
EL PASO

State
TX

Zip Code
79998

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019432

Date of Disbursement

04 / 30 / 2011

Amount of Each Disbursement this Period

10442.26

C.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS MERCHANT ACCOUNT

Mailing Address PO BOX 981532

City
EL PASO

State
TX

Zip Code
79998

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019434

Date of Disbursement

04 / 30 / 2011

Amount of Each Disbursement this Period

58.45

SUBTOTAL of Disbursements This Page (optional)

10500.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 701 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS MERCHANT ACCOUNT

Mailing Address PO BOX 981532

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019436

Date of Disbursement

/ /

Amount of Each Disbursement this Period

475.89

B. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS MERCHANT ACCOUNT

Mailing Address PO BOX 981532

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019438

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2528.93

C. Full Name (Last, First, Middle Initial)
ANTON DESIGN

Mailing Address P.O. BOX 204

City CLIFTON State VA Zip Code 20124

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019016

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

3754.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 702 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ANTON DESIGN

Mailing Address P.O. BOX 204

City
CLIFTON

State
VA

Zip Code
20124

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019223

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

ASAP PRINT & GRAPHICS

Mailing Address 2805 MOUNT VERNON AVE

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019224

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1768.75

C.

Full Name (Last, First, Middle Initial)

ASHLEY ENTERTAINMENT INC

Mailing Address 2650 PHILIPPE PARKWAY

City
SAFETY HARBOR

State
FL

Zip Code
34695

Purpose of Disbursement
STAGING/AUDIO/VISUAL SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019350

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8710.85

SUBTOTAL of Disbursements This Page (optional)

10979.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 703 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ATCHLEY & ASSOCIATES

Mailing Address 6850 AUSTIN CENTER BOULEVARD
SUITE 180

City AUSTIN State TX Zip Code 78731-3129

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.018999

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

11131.39

B.

Full Name (Last, First, Middle Initial)

AUTOMATIC DATA PROCESSING

Mailing Address PO BOX 9001006

City LOUISVILLE State KY Zip Code 40290-1006

Purpose of Disbursement
PAYROLL SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019075

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

394.44

C.

Full Name (Last, First, Middle Initial)

AUTOMATIC DATA PROCESSING

Mailing Address PO BOX 9001006

City LOUISVILLE State KY Zip Code 40290-1006

Purpose of Disbursement
PAYROLL SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019213

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

55.52

SUBTOTAL of Disbursements This Page (optional)

11581.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 704 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. AUTOMATIC DATA PROCESSING

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 9001006

City LOUISVILLE State KY Zip Code 40290-1006

Purpose of Disbursement
PAYROLL SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019330

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

397.42

B. BROADPOINT TECHNOLOGIES

Full Name (Last, First, Middle Initial)

Mailing Address 7617 ARLINGTON RD

City BETHESDA State MD Zip Code 20814

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019000

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

929.40

C. BROADPOINT TECHNOLOGIES

Full Name (Last, First, Middle Initial)

Mailing Address 7617 ARLINGTON RD

City BETHESDA State MD Zip Code 20814

Purpose of Disbursement
SOFTWARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019076

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

2842.92

SUBTOTAL of Disbursements This Page (optional)

4169.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 705 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CALVERT-JONES COMPANY

Mailing Address 5703 EDSALL RD

City
ALEXANDRIA

State
VA

Zip Code
22304

Purpose of Disbursement
EQUIPMENT MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019078

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

CAPITAL RESEARCH GROUP

Mailing Address 1901 PENNSYLVANIA AVE NW
STE 600

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.018978

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7742.00

C.

Full Name (Last, First, Middle Initial)

CAPITOL FLOURISH

Mailing Address 8458 BROOK ROAD

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019020

Date of Disbursement

/ /

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

11142.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 706 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019079

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

17502.90

B.

Full Name (Last, First, Middle Initial)

CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019180

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

17866.82

C.

Full Name (Last, First, Middle Initial)

CAPITOL HILL LISTS

Mailing Address 264 N LUMPKIN STREET # 202

City
ATHENS

State
GA

Zip Code
30601

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019181

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

8288.77

SUBTOTAL of Disbursements This Page (optional)

43658.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 707 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CAPITOL HILL LISTS

Mailing Address 264 N LUMPKIN STREET # 202

City ATHENS State GA Zip Code 30601

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019225

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

29247.68

B.

Full Name (Last, First, Middle Initial)

CAREFREE OFFICE TECHNOLOGY INC

Mailing Address 10400 EATON PL
STE 105

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019001

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

263.88

C.

Full Name (Last, First, Middle Initial)

CAREFREE OFFICE TECHNOLOGY INC

Mailing Address 10400 EATON PL
STE 105

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019080

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

465.99

SUBTOTAL of Disbursements This Page (optional)

29977.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 708 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
CAREFREE OFFICE TECHNOLOGY INC

Mailing Address 10400 EATON PL
STE 105

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019331

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

115.87

B. Full Name (Last, First, Middle Initial)
CASSANDRA FINE CATERING

Mailing Address 1435 DRAGON ST

City DALLAS State TX Zip Code 45207

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019351

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

5185.18

C. Full Name (Last, First, Middle Initial)
CFB STRATEGIES

Mailing Address 247 FARRAGUT AVE

City HASTINGS ON HUDSON State NY Zip Code 10706

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019183

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

999.00

SUBTOTAL of Disbursements This Page (optional)

6300.05

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 709 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CHURCHILL DOWNS

Mailing Address 700 CENTRAL AVE

City LOUISVILLE State KY Zip Code 40208

Purpose of Disbursement
PARKING SVC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019226

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019021

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

27892.87

C.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019184

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Amount of Each Disbursement this Period

5244.53

SUBTOTAL of Disbursements This Page (optional)

33737.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 710 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019227

Date of Disbursement

/ /

Amount of Each Disbursement this Period

175.00

B.

Full Name (Last, First, Middle Initial)

COLUMBIA BOOKS

Mailing Address 8120 WOODMONT AVE
SUITE 110

City
BETHESDA

State
MD

Zip Code
20814

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019022

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14000.00

C.

Full Name (Last, First, Middle Initial)

COMMUNICATION CORP OF AMERICA

Mailing Address 13195 FREEDOM WAY

City
BOSTON

State
VA

Zip Code
22713

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019023

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12124.48

SUBTOTAL of Disbursements This Page (optional)

26299.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 711 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
COMMUNICATION CORP OF AMERICA

Mailing Address 13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019210

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11484.66

B. Full Name (Last, First, Middle Initial)
COMMUNICATION CORP OF AMERICA

Mailing Address 13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019228

Date of Disbursement

/ /

Amount of Each Disbursement this Period

61703.74

C. Full Name (Last, First, Middle Initial)
COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019174

Date of Disbursement

/ /

Amount of Each Disbursement this Period

381.58

SUBTOTAL of Disbursements This Page (optional)

73569.98

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 712 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City
ANNAPOLISState
MDZip Code
21411Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019325

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	1

Amount of Each Disbursement this Period

381.58

B.

Full Name (Last, First, Middle Initial)

CONFERENCE AMERICA INC

Mailing Address PO BOX 241188

City
MONTGOMERYState
ALZip Code
36124-1188Purpose of Disbursement
PHONE SVC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019082

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	1

Amount of Each Disbursement this Period

716.93

C.

Full Name (Last, First, Middle Initial)

CONRAD DIRECT INC

Mailing Address 300 KNICKERBOCKER RD

City
CRESSKILLState
NJZip Code
07626Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019024

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

700.12

SUBTOTAL of Disbursements This Page (optional)

1798.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 713 / 760

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CONRAD DIRECT INC

Mailing Address 300 KNICKERBOCKER RD

City CRESSKILL State NJ Zip Code 07626

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019185

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.12

B.

Full Name (Last, First, Middle Initial)

DATALAB USA LLC

Mailing Address 20261 GOLDENROD LN

City GERMANTOWN State MD Zip Code 20876

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019186

Date of Disbursement

/ /

Amount of Each Disbursement this Period

27935.85

C.

Full Name (Last, First, Middle Initial)

DATALAB USA LLC

Mailing Address 20261 GOLDENROD LN

City GERMANTOWN State MD Zip Code 20876

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019229

Date of Disbursement

/ /

Amount of Each Disbursement this Period

93112.30

SUBTOTAL of Disbursements This Page (optional)

122048.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 714 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DATALAB USA LLC

Mailing Address 20261 GOLDENROD LN

City
GERMANTOWN

State
MD

Zip Code
20876

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019352

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10850.00

B.

Full Name (Last, First, Middle Initial)

DC TREASURER

Mailing Address PO BOX 96384

City
WASHINGTON

State
DC

Zip Code
20090-6384

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019003

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1212.40

C.

Full Name (Last, First, Middle Initial)

DC TREASURER

Mailing Address PO BOX 37630

City
WASHINGTON

State
DC

Zip Code
20013

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019172

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7130.99

SUBTOTAL of Disbursements This Page (optional)

19193.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 715 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.019173 Date of Disbursement																				
Mailing Address PO BOX 1582	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	1												
City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL TAXES	<table border="1"> <tr> <td colspan="10">420.58</td> </tr> </table>	420.58																			
420.58																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.019323 Date of Disbursement																				
Mailing Address PO BOX 37630	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL TAXES	<table border="1"> <tr> <td colspan="10">7086.86</td> </tr> </table>	7086.86																			
7086.86																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) DC TREASURER	Transaction ID: SB21-0.019324 Date of Disbursement																				
Mailing Address PO BOX 1582	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	1	1												
City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAYROLL TAXES	<table border="1"> <tr> <td colspan="10">365.82</td> </tr> </table>	365.82																			
365.82																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7873.26

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 716 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ELAVON

Transaction ID: SB21-0.019429

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Mailing Address ONE CONCOURSE PKWY, STE 300

Amount of Each Disbursement this Period

45.00

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

ELAVON

Transaction ID: SB21-0.019431

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Mailing Address ONE CONCOURSE PKWY, STE 300

Amount of Each Disbursement this Period

11848.99

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

ELAVON

Transaction ID: SB21-0.019433

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Mailing Address ONE CONCOURSE PKWY, STE 300

Amount of Each Disbursement this Period

392.57

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

12286.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 717 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PKWY, STE 300

City
ATLANTA

State
GA

Zip Code
30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019435

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3421.57

B.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PKWY, STE 300

City
ATLANTA

State
GA

Zip Code
30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019437

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5386.39

C.

Full Name (Last, First, Middle Initial)

ELAVON

Mailing Address ONE CONCOURSE PKWY, STE 300

City
ATLANTA

State
GA

Zip Code
30328

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019439

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

8857.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 718 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

EPIPHANY PRODUCTIONS INC

Mailing Address 104 E HUME AVE

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.018990

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7500.00

B.

Full Name (Last, First, Middle Initial)

EPIPHANY PRODUCTIONS INC

Mailing Address 104 E HUME AVE

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019026

Date of Disbursement

/ /

Amount of Each Disbursement this Period

26970.00

C.

Full Name (Last, First, Middle Initial)

EPIPHANY PRODUCTIONS INC

Mailing Address 104 E HUME AVE

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019187

Date of Disbursement

/ /

Amount of Each Disbursement this Period

127510.00

SUBTOTAL of Disbursements This Page (optional)

161980.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 719 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

EPIPHANY PRODUCTIONS INC

Mailing Address 104 E HUME AVE

City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019230

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Amount of Each Disbursement this Period

39464.38

B.

Full Name (Last, First, Middle Initial)

FEDEX KINKOS

Mailing Address PO BOX 672085

City
DALLASState
TXZip Code
75267-2085Purpose of Disbursement
PRINTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019027

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

2332.29

C.

Full Name (Last, First, Middle Initial)

FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD
STE 270City
ST PAULState
MNZip Code
55128Purpose of Disbursement
MEDIA

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019004

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

430.45

SUBTOTAL of Disbursements This Page (optional)

42227.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 720 / 760

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FUNDLY INC

Mailing Address 70 WEST BROADWAY

City WESTFORD State MA Zip Code 01886

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019231

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2402.43

B.

Full Name (Last, First, Middle Initial)

GUARDIAN LIFE INSURANCE COMPANY

Mailing Address PO BOX 95101

City CHICAGO State IL Zip Code 60694-5101

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019007

Date of Disbursement

/ /

Amount of Each Disbursement this Period

53057.46

C.

Full Name (Last, First, Middle Initial)

GUARDIAN LIFE INSURANCE COMPANY

Mailing Address PO BOX 95101

City CHICAGO State IL Zip Code 60694-5101

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019333

Date of Disbursement

/ /

Amount of Each Disbursement this Period

51749.28

SUBTOTAL of Disbursements This Page (optional)

107209.17

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 721 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GULF DIRECT

Transaction ID: SB21-0.019189

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Mailing Address 8213 SHOAL CREEK BLVD
STE 105

Amount of Each Disbursement this Period

City AUSTIN State TX Zip Code 78757

16695.76

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

GULF DIRECT

Transaction ID: SB21-0.019353

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Mailing Address 8213 SHOAL CREEK BLVD
STE 105

Amount of Each Disbursement this Period

City AUSTIN State TX Zip Code 78757

1629.77

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

HOLTZMAN VOGEL PLLC

Transaction ID: SB21-0.018989

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Mailing Address 45 NORTH HILL DR
SUITE 100

Amount of Each Disbursement this Period

City WARRENTON State VA Zip Code 20186

10000.00

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

28325.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 722 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

HOON DESIGNS LLC

Mailing Address 2800 SHIRLINGTON RD
STE 920

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019029

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

HUCKABY DAVIS LISKER

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.018983

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

10020.00

C.

Full Name (Last, First, Middle Initial)

ICS CORPORATION

Mailing Address 2225 RICHMOND ST

City PHILADELPHIA State PA Zip Code 19125

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019211

Date of Disbursement

04 / 20 / 2011

Amount of Each Disbursement this Period

52862.48

SUBTOTAL of Disbursements This Page (optional)

63482.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 723 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ICS CORPORATION

Mailing Address 2225 RICHMOND ST

City
PHILADELPHIA

State
PA

Zip Code
19125

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019232

Date of Disbursement

/ /

Amount of Each Disbursement this Period

55059.15

B.

Full Name (Last, First, Middle Initial)

ICS CORPORATION

Mailing Address 2225 RICHMOND ST

City
PHILADELPHIA

State
PA

Zip Code
19125

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019354

Date of Disbursement

/ /

Amount of Each Disbursement this Period

43309.22

C.

Full Name (Last, First, Middle Initial)

ILLUMEN

Mailing Address 1000 POTOMAC ST NW

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019334

Date of Disbursement

/ /

Amount of Each Disbursement this Period

833.33

SUBTOTAL of Disbursements This Page (optional)

99201.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 724 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DR

City AKRON State OH Zip Code 44333

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019015

Date of Disbursement

/ /

Amount of Each Disbursement this Period

44377.03

B. Full Name (Last, First, Middle Initial)
INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DR

City AKRON State OH Zip Code 44333

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019050

Date of Disbursement

/ /

Amount of Each Disbursement this Period

43586.61

C. Full Name (Last, First, Middle Initial)
INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DR

City AKRON State OH Zip Code 44333

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019051

Date of Disbursement

/ /

Amount of Each Disbursement this Period

71250.00

SUBTOTAL of Disbursements This Page (optional)

159213.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 725 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DR

City
AKRON

State
OH

Zip Code
44333

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019190

Date of Disbursement

/ /

Amount of Each Disbursement this Period

91203.16

B.

Full Name (Last, First, Middle Initial)

INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DR

City
AKRON

State
OH

Zip Code
44333

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019233

Date of Disbursement

/ /

Amount of Each Disbursement this Period

27924.45

C.

Full Name (Last, First, Middle Initial)

INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DR

City
AKRON

State
OH

Zip Code
44333

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019355

Date of Disbursement

/ /

Amount of Each Disbursement this Period

82146.13

SUBTOTAL of Disbursements This Page (optional)

201273.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 726 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

INTERACTIVE MARKETING CONSULTING

Mailing Address 18318 EAST LAURA SHORE DR

City State Zip Code
CYRPRESS TX 77433

Purpose of Disbursement
ECAMPAIGN CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019083

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5400.00

B.

Full Name (Last, First, Middle Initial)

JOHN GILL CONSULTING

Mailing Address 3424 WENTWOOD DR

City State Zip Code
DALLAS TX 75225

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019191

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6319.52

C.

Full Name (Last, First, Middle Initial)

KONICA MINOLTA

Mailing Address 21146 NETWORK PLACE

City State Zip Code
CHICAGO IL 60673-1211

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019084

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1117.74

SUBTOTAL of Disbursements This Page (optional)

12837.26

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 728 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

KRIEG DEVAULT LLP

Mailing Address ONE INDIANA SQUARE
SUITE 2800

City INDIANAPOLIS State IN Zip Code 46204-2079

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019337

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

3100.10

B.

Full Name (Last, First, Middle Initial)

LILLY & COMPANY

Mailing Address 1005 CONGRESS AVE
SUITE 910

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019194

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

223.27

C.

Full Name (Last, First, Middle Initial)

LVH CONSULTING

Mailing Address 2119 PAUL SPRING ROAD

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.018986

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)

10823.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 729 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MAGELLAN DATA AND MAPPING

Mailing Address 1685 BOXELDER ST
STE 300

City LOUISVILLE State CO Zip Code 80027

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019338

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
MANDARIN ORIENTAL HOTELS

Mailing Address 1330 MARYLAND AVE SW

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement
CATERING/FACILITY RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019358

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15214.63

C. Full Name (Last, First, Middle Initial)
MARKET TECH GROUP

Mailing Address PO BOX 26864

City SALT LAKE CITY State UT Zip Code 84126

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019030

Date of Disbursement

/ /

Amount of Each Disbursement this Period

32619.04

SUBTOTAL of Disbursements This Page (optional)

50333.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 730 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MARKET TECH GROUP

Mailing Address PO BOX 26864

City
SALT LAKE CITY

State
UT

Zip Code
84126

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019196

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

18142.74

B.

Full Name (Last, First, Middle Initial)

MARKET TECH GROUP

Mailing Address PO BOX 26864

City
SALT LAKE CITY

State
UT

Zip Code
84126

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019359

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

13968.33

C.

Full Name (Last, First, Middle Initial)

MDI IMAGING AND MAIL

Mailing Address 21955 CASCADES PKWY

City
DULLES

State
VA

Zip Code
20166

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019197

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

13270.07

SUBTOTAL of Disbursements This Page (optional)

45381.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 731 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MERKLE INC

Mailing Address 100 JAMISON CT

City
HAGERSTOWN

State
MD

Zip Code
21740

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019032

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12653.73

B.

Full Name (Last, First, Middle Initial)

MERKLE INC

Mailing Address 100 JAMISON CT

City
HAGERSTOWN

State
MD

Zip Code
21740

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019198

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59319.94

C.

Full Name (Last, First, Middle Initial)

MERKLE INC

Mailing Address 100 JAMISON CT

City
HAGERSTOWN

State
MD

Zip Code
21740

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019361

Date of Disbursement

/ /

Amount of Each Disbursement this Period

879.87

SUBTOTAL of Disbursements This Page (optional)

72853.54

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 732 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MJO SERVICES

Mailing Address 1101 BUSINESS PARKWAY SOUTH

City
WESTMINSTERState
MDZip Code
21157Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019033

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

1687.96

B.

Full Name (Last, First, Middle Initial)

MOBY DICK AIRWAYS, LTD.

Mailing Address P.O. BOX 77518

City
WASHINGTONState
DCZip Code
20013-8518Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019362

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Amount of Each Disbursement this Period

7173.00

C.

Full Name (Last, First, Middle Initial)

NATIONAL BUILDING MUSEUM

Mailing Address 401 F STREET NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019034

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

25000.00

SUBTOTAL of Disbursements This Page (optional)

33860.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 733 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NATIONAL FITNESS NETWORK

Mailing Address 14059 VISTA DR
#140-B

City LAUREL State MD Zip Code 20707

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019011

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

220.00

B.

Full Name (Last, First, Middle Initial)

NATIONAL MAILING SYSTEMS

Mailing Address 1749 OLD MEADOW ROAD
SUITE 200

City MCLEAN State VA Zip Code 22102-4314

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019215

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

98.88

C.

Full Name (Last, First, Middle Initial)

NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019216

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

25596.36

SUBTOTAL of Disbursements This Page (optional)

25915.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 734 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC

Mailing Address 815 SLATERS LANE

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019339

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

7662.63

B.

Full Name (Last, First, Middle Initial)

ONMESSAGE INC

Mailing Address 2130 PRIEST BRIDGE DR # 11

City
CROFTON

State
MD

Zip Code
21114

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.018991

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

13000.00

C.

Full Name (Last, First, Middle Initial)

ONMESSAGE INC

Mailing Address 2130 PRIEST BRIDGE DR # 11

City
CROFTON

State
MD

Zip Code
21114

Purpose of Disbursement
MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019035

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

28611.74

SUBTOTAL of Disbursements This Page (optional)

49274.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 735 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

OXFORD COMMUNICATIONS LLC

Mailing Address 121 S ALFRED ST
STE 6

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.018992

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

9166.66

B.

Full Name (Last, First, Middle Initial)

OXFORD POLITICAL

Mailing Address 121 S. ALFRED STREET, STE 8

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019199

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

8582.10

C.

Full Name (Last, First, Middle Initial)

OXFORD POLITICAL

Mailing Address 121 S. ALFRED STREET, STE 8

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019235

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

12008.72

SUBTOTAL of Disbursements This Page (optional)

29757.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 736 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

PAMELA PRINTING COMPANY

Mailing Address 550 JULIE RIVERS DRIVE, # 310

City
SUGAR LAND

State
TX

Zip Code
77478

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019036

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2771.12

B.

Full Name (Last, First, Middle Initial)

PE SYSTEMS LLC

Mailing Address 245 W MAIN AVE
STE 400

City
SPOKANE

State
WA

Zip Code
99201

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019037

Date of Disbursement

/ /

Amount of Each Disbursement this Period

482.00

C.

Full Name (Last, First, Middle Initial)

PLANET TECHNOLOGIES INC.

Mailing Address 20400 OBSERVATION DRIVE
SUITE 204

City
GERMANTOWN

State
MD

Zip Code
20876

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019341

Date of Disbursement

/ /

Amount of Each Disbursement this Period

9856.04

SUBTOTAL of Disbursements This Page (optional)

13109.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 737 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PRECISION DATA MANAGEMENT</p> <p>Mailing Address 12120 SUNSET HILLS RD SUITE 450</p> <p>City RESTON State VA Zip Code 20190</p> <p>Purpose of Disbursement DATA PROCESSING SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019038</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 4463.22</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) PRECISION DATA MANAGEMENT</p> <p>Mailing Address 12120 SUNSET HILLS RD SUITE 450</p> <p>City RESTON State VA Zip Code 20190</p> <p>Purpose of Disbursement DATA PROCESSING SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019200</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 6464.72</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PRESS ASSOCIATION INC</p> <p>Mailing Address P.O. BOX 414243</p> <p>City BOSTON State MA Zip Code 02241-4243</p> <p>Purpose of Disbursement SUBSCRIPTIONS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21-0.019342</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1507.28</p>

SUBTOTAL of Disbursements This Page (optional)

12435.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 738 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

QWEST COMMUNICATIONS

Mailing Address PO BOX 52187

City
PHOENIX

State
AZ

Zip Code
85072-2187

Purpose of Disbursement
PHONE SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019343

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

1005.51

B.

Full Name (Last, First, Middle Initial)

RAM PRODUCTION SERVICES

Mailing Address 5805 HALL ST

City
BURKE

State
VA

Zip Code
22015

Purpose of Disbursement
EQUIPMENT MAINTENANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019012

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

282.45

C.

Full Name (Last, First, Middle Initial)

REPUBLICAN DEPOT, LLC

Mailing Address P.O. BOX 222

City
UNION CITY

State
IN

Zip Code
47390

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019039

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

563.74

SUBTOTAL of Disbursements This Page (optional)

1851.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RESPONSE AMERICA LLC

Mailing Address 264 N LUMPKIN STREET #202

City ATHENS State GA Zip Code 30601

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019236

Date of Disbursement

/ /

Amount of Each Disbursement this Period

27998.76

B.

Full Name (Last, First, Middle Initial)

SMARTTECH CORPORATION

Mailing Address PO BOX 11181

City CHATTANOOGA State TN Zip Code 37401-2181

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019217

Date of Disbursement

/ /

Amount of Each Disbursement this Period

163.88

C.

Full Name (Last, First, Middle Initial)

SMARTTECH CORPORATION

Mailing Address PO BOX 11181

City CHATTANOOGA State TN Zip Code 37401-2181

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019345

Date of Disbursement

/ /

Amount of Each Disbursement this Period

564.60

SUBTOTAL of Disbursements This Page (optional)

28727.24

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SMS DIRECT INC

Mailing Address 7540 MASON KING CT

City
MANASSAS

State
VA

Zip Code
20109

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019201

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

23595.00

B.

Full Name (Last, First, Middle Initial)

SOUTHWEST PUBLISHING AND MAILING

Mailing Address 2600 NW TOPEKA BLVD

City
TOPEKA

State
KS

Zip Code
66617

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019202

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

92158.05

C.

Full Name (Last, First, Middle Initial)

SQUARE 737 LLC

Mailing Address 1100 NEW JERSEY AVE SE
SUITE 1000

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
PARKING SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019218

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

2420.00

SUBTOTAL of Disbursements This Page (optional)

118173.05

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 741 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

STAPLES CREDIT PLAN

Mailing Address 8725 W SAHARA

City
LAS VEGASState
NVZip Code
89163Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019346

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	1

Amount of Each Disbursement this Period

2042.39

B.

Full Name (Last, First, Middle Initial)

STARBOARD GROUP

Mailing Address 1420 W CANAL CT
SUITE 10City
LITTLETONState
COZip Code
80120Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019042

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

STRATEGIC FUNDRAISING INC

Mailing Address 2625 MOMENTUM PL

City
CHICAGOState
ILZip Code
60689-5326Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019203

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Amount of Each Disbursement this Period

138463.80

SUBTOTAL of Disbursements This Page (optional)

142006.19

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
STRATEGIC FUNDRAISING INC

Mailing Address 2625 MOMENTUM PL

City CHICAGO State IL Zip Code 60689-5326

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019237

Date of Disbursement

/ /

Amount of Each Disbursement this Period

48509.35

B. Full Name (Last, First, Middle Initial)
STRATEGIC FUNDRAISING INC

Mailing Address 2625 MOMENTUM PL

City CHICAGO State IL Zip Code 60689-5326

Purpose of Disbursement
FUNDRAISING PHONE CALLS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019363

Date of Disbursement

/ /

Amount of Each Disbursement this Period

25466.19

C. Full Name (Last, First, Middle Initial)
SUMMIT OPEN SYSTEMS LLC

Mailing Address PO BOX 841

City ARNOLD State MD Zip Code 21012

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019347

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

74275.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TEXAS UNLIMITED BAND

Mailing Address 3075 CR 118

City
GIDDINGS

State
TX

Zip Code
78942

Purpose of Disbursement
MUSICAL ENTERTAINMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019204

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

THE COMPLIANCE CONSULTING COMPANY OF VA LLC

Mailing Address PO BOX 365

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.018980

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

THE LUKENS COMPANY

Mailing Address 2800 SHIRLINGTON RD
9TH FLOOR

City
ARLINGTON

State
VA

Zip Code
22206-3613

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019195

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3892.46

SUBTOTAL of Disbursements This Page (optional)

16892.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THE LUKENS COMPANY

Mailing Address 2800 SHIRLINGTON RD
9TH FLOOR

City ARLINGTON State VA Zip Code 22206-3613

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019234

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

16094.77

B.

Full Name (Last, First, Middle Initial)

THE MCINTOSH COMPANY

Mailing Address 5310 HARVEST HILL ROAD, STE 209

City DALLAS State TX Zip Code 75230

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.018988

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

7500.00

C.

Full Name (Last, First, Middle Initial)

THE MCINTOSH COMPANY

Mailing Address 5310 HARVEST HILL ROAD, STE 209

City DALLAS State TX Zip Code 75230

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019031

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

2657.54

SUBTOTAL of Disbursements This Page (optional)

26252.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 745 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THE MCINTOSH COMPANY

Mailing Address 5310 HARVEST HILL ROAD, STE 209

City DALLAS State TX Zip Code 75230

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019360

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18500.00

B.

Full Name (Last, First, Middle Initial)

THE TARRANCE GROUP

Mailing Address 201 N UNION ST
STE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019348

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7500.00

C.

Full Name (Last, First, Middle Initial)

THE WOODS HERBERGER GROUP INC

Mailing Address 1200 ANASTASIA AVENUE, STE 310

City CORAL GABLES State FL Zip Code 33414

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.018995

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)

33500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THE WOODS HERBERGER GROUP INC

Mailing Address 1200 ANASTASIA AVENUE, STE 310

City
CORAL GABLES

State
FL

Zip Code
33414

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019044

Date of Disbursement

/ /

Amount of Each Disbursement this Period

60740.00

B.

Full Name (Last, First, Middle Initial)

TMA DIRECT

Mailing Address 12120 SUNSET HILLS ROAD, STE 450

City
RESTON

State
VA

Zip Code
20190

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019045

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14049.38

C.

Full Name (Last, First, Middle Initial)

TMA DIRECT

Mailing Address 12120 SUNSET HILLS ROAD, STE 450

City
RESTON

State
VA

Zip Code
20190

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019205

Date of Disbursement

/ /

Amount of Each Disbursement this Period

24734.90

SUBTOTAL of Disbursements This Page (optional)

99524.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 747 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TMA DIRECT

Mailing Address 12120 SUNSET HILLS ROAD, STE 450

City
RESTON

State
VA

Zip Code
20190

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019238

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5797.50

B.

Full Name (Last, First, Middle Initial)

TMA DIRECT

Mailing Address 12120 SUNSET HILLS ROAD, STE 450

City
RESTON

State
VA

Zip Code
20190

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019365

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5203.95

C.

Full Name (Last, First, Middle Initial)

TOBY TOURS

Mailing Address 145 CARTER AVE

City
LOUISVILLE

State
KY

Zip Code
40229

Purpose of Disbursement
TRANSPORTATION SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019366

Date of Disbursement

/ /

Amount of Each Disbursement this Period

610.00

SUBTOTAL of Disbursements This Page (optional)

11611.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
TRANSAMERICA RETIREMENT SERVICES

Mailing Address PO BOX 30368

City LOS ANGELES State CA Zip Code 90099-9208

Purpose of Disbursement
RETIREMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019177

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15132.26

B. Full Name (Last, First, Middle Initial)
TRANSAMERICA RETIREMENT SERVICES

Mailing Address PO BOX 30368

City LOS ANGELES State CA Zip Code 90099-9208

Purpose of Disbursement
RETIREMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019329

Date of Disbursement

/ /

Amount of Each Disbursement this Period

18729.57

C. Full Name (Last, First, Middle Initial)
UNICOR 290 SIGN SYSTEMS

Mailing Address 5350 CORPORATE GROVE BLVD SE

City GRAND RAPIDS State MI Zip Code 49512

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019088

Date of Disbursement

/ /

Amount of Each Disbursement this Period

307.19

SUBTOTAL of Disbursements This Page (optional)

34169.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 749 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019175

Date of Disbursement

04 / 08 / 2011

Amount of Each Disbursement this Period

67748.66

B.

Full Name (Last, First, Middle Initial)

US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019327

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

68484.58

C.

Full Name (Last, First, Middle Initial)

US MONITOR SERVICE

Mailing Address 86 MAPLE AVE

City
NEW YORK

State
NY

Zip Code
10956-5092

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019206

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

918.51

SUBTOTAL of Disbursements This Page (optional)

137151.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 750 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

US POSTMASTER

Mailing Address 900 BRENTWOOD ROAD NE

City
WASHINGTON

State
DC

Zip Code
20018-1004

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019046

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

40000.00

B.

Full Name (Last, First, Middle Initial)

VANDENBERG AND ASSOCIATES INC

Mailing Address 3927 ELM AVENUE

City
LONG BEACH

State
CA

Zip Code
90807

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019047

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

23.76

C.

Full Name (Last, First, Middle Initial)

VANDENBERG AND ASSOCIATES INC

Mailing Address 3927 ELM AVENUE

City
LONG BEACH

State
CA

Zip Code
90807

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019207

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

45023.76

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 751 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
VANDENBERG AND ASSOCIATES INC

Mailing Address 3927 ELM AVENUE

City LONG BEACH State CA Zip Code 90807

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019239

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Amount of Each Disbursement this Period

9160.00

B. Full Name (Last, First, Middle Initial)
VERIZON CABS

Mailing Address PO BOX 4832

City TRENTON State NJ Zip Code 08650-4832

Purpose of Disbursement
PHONE SVC

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019219

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Amount of Each Disbursement this Period

1690.92

C. Full Name (Last, First, Middle Initial)
VIRGINIA DEPT OF TAXATION

Mailing Address PO BOX 1411

City RICHMOND State VA Zip Code 23212

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019176

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	1

Amount of Each Disbursement this Period

4870.04

SUBTOTAL of Disbursements This Page (optional)

15720.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

VIRGINIA DEPT OF TAXATION

Mailing Address PO BOX 1411

City
RICHMOND

State
VA

Zip Code
23212

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019328

Date of Disbursement

04 / 22 / 2011

Amount of Each Disbursement this Period

5033.89

B.

Full Name (Last, First, Middle Initial)

VISUAL IMPACT DESIGN

Mailing Address 264 N LUMPKIN STREET #202

City
ATHENS

State
GA

Zip Code
30601

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019048

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

VISUAL IMPACT DESIGN

Mailing Address 264 N LUMPKIN STREET #202

City
ATHENS

State
GA

Zip Code
30601

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21-0.019208

Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

5783.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 753 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WACHOVIA NA

Mailing Address 1970 CHAIN BRIDGE RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019384

Date of Disbursement

04 / 30 / 2011

Amount of Each Disbursement this Period

13145.75

B.

Full Name (Last, First, Middle Initial)

WACHOVIA NA

Mailing Address 1970 CHAIN BRIDGE RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019430

Date of Disbursement

04 / 30 / 2011

Amount of Each Disbursement this Period

3702.81

C.

Full Name (Last, First, Middle Initial)

WESTAR SATELLITE SERVICES

Mailing Address PO BOX 974375

City DALLAS State TX Zip Code 75397-4375

Purpose of Disbursement
TV UPLINK SVC

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019349

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

17098.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WILAND DIRECT

Mailing Address 6309 MONARCH PARK PLACE, STE 201

City LONGMONT State CO Zip Code 80503

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019049

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

937.50

B.

Full Name (Last, First, Middle Initial)

WILAND DIRECT

Mailing Address 6309 MONARCH PARK PLACE, STE 201

City LONGMONT State CO Zip Code 80503

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019367

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

9822.61

C.

Full Name (Last, First, Middle Initial)

ZONES

Mailing Address PO BOX 34740

City SEATTLE State WA Zip Code 98124-1740

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019087

Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

3462.23

SUBTOTAL of Disbursements This Page (optional)

14222.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 755 / 760

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ZONES

Mailing Address PO BOX 34740

City
SEATTLE

State
WA

Zip Code
98124-1740

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21-0.019221

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4061.03

SUBTOTAL of Disbursements This Page (optional)

4061.03

TOTAL This Period (last page this line number only)

2984768.91

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 756 / 760

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WACHOVIA NA

Mailing Address 1970 CHAIN BRIDGE RD

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
LOAN PAYMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB26-0.019385

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	1

Amount of Each Disbursement this Period

500000.00

SUBTOTAL of Disbursements This Page (optional)

500000.00

TOTAL This Period (last page this line number only)

500000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 757 / 760

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) JOSEPH R BLANTERN Mailing Address 2230 FOREST AVE	Transaction ID: SB28A-0.019019 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 1 1</div> </div>
City State Zip Code NIAGARA FALLS NY 14301-1402 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>250.00</div>
B. Full Name (Last, First, Middle Initial) EUGENE HANSEN Mailing Address 1607 YALECREST AVE City State Zip Code SALT LAKE CITY UT 84105 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB28A-0.019028 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>300.00</div>
C. Full Name (Last, First, Middle Initial) DAVID HERRO Mailing Address 65 EAST GROETHE ST APT 3N City State Zip Code CHICAGO IL 60610 Purpose of Disbursement CONTRIBUTION REFUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB28A-0.018997 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 6 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>1700.00</div>

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

2250.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

TEXAS CONSUMER LENDERS PAC

Mailing Address 715 WEST ABRAM

City
ARLINGTON

State
TX

Zip Code
76013

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28C-0.018998

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 759 / 760

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

GRUBER HURST JOHANSEN & HAIL

Mailing Address 1445 ROSS AVENUE
SUITE 2500

City DALLAS State TX Zip Code 75202-2711

Purpose of Disbursement
RECOUNT LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29-0.019212

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8487.53

SUBTOTAL of Disbursements This Page (optional)

8487.53

TOTAL This Period (last page this line number only)

8487.53

SCHEDULE C (FEC Form 3X)Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Transaction ID: SCHEDC_1

LOAN SOURCE Full Name (Last, First, Middle Initial)
WACHOVIA

Election:

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address 1753 PINNACLE DRIVE

City MCLEAN

State VA

ZIP Code

22102

Original Amount of Loan

12000000.00

Cumulative Payment To Date

4500000.00

Balance Outstanding at Close of This Period

7500000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 9D D
1 4Y Y Y Y
2 0 1 0

09/14/2011

0.0000

% (apr)

☒ Yes ☐ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

7500000.00

TOTALS This Period (last page in this line only) ▶

7500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.